

Borough of Bedford



Health of the Community

1971

BOROUGH OF BEDFORD

PUBLIC HEALTH

IN BEDFORD

1971

BY

J.G.M. MORTIMER

M.B., Ch.B., D.Obst., R.C.O.G., D.P.H.

MEDICAL OFFICER OF HEALTH

together with the Report of

E.J. CONSTABLE

M.A.P.H.I., M.R.S.H.,

CHIEF PUBLIC HEALTH INSPECTOR

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REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

Preface

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REPORT
OF THE
MEDICAL OFFICER OF HEALTH



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HEALTH COMMITTEE

(31 December 1971)

Councillor Monica M Still (Chairman
Councillor Winifred M Fowler (The Mayor) (Vice Chairman)
Councillor W Astle
Councillor T R Donnelly
Councillor Muriel J George
Councillor S Morris
Councillor Eileen G Smith
Councillor E G Valentine

STAFF

Medical Officer of Health and School Medical Officer
J G M MORTIMER MB, ChB, DObst, RCOG, DPH

Deputy Medical Officer of Health and Deputy School Medical Officer
D G DANIELS MB, BCh, MRCS, LRCP, DPH

Chief Public Health Inspector
E J CONSTABLE MAPHI, MRSH

Deputy Chief Public Health Inspector
N H HOBDAI DMA, MAPHI

Chief Clerk : F J DIX

Director of Nursing Services

* MISS W FROST OBE, SRN, SCM, HV, Cert. Queen's Nurse

* Chief Dental Officer : H W S SHEASBY LDS

Occupational Therapist : MRS E M GREEN MAOT

* Whole time officers of the Bedfordshire County Council
undertaking supervisory duties or working in shared service
capacity

PUBLIC HEALTH DEPARTMENT
TOWN HALL
BEDFORD

Tel No 0234 - 67422

MAY 1972

TO: THE MAYOR, ALDERMEN AND
COUNCILLORS OF THE BOROUGH OF BEDFORD

Ladies and Gentlemen,

TYPHOID is news and lends excitement to the work of the department and adds interest to this report.

During the year a child having been admitted to South Wing Hospital with an intestinal upset was diagnosed as suffering from typhoid fever. Although the other members of the family were not affected, but since the family lived in a house in multiple occupation, all the tenants of that house were investigated and it was found that another resident was a carrier.

The intensive investigations which are necessary following the discovery of a case of typhoid fever are carried out by the Public Health Inspectors as an additional load on their normal work. This ability of the Public Health Inspectors to take on immediate urgent investigations of outbreaks of intestinal diseases (for they also investigate cases of salmonella food poisoning, dysentery in schools etc.) is to be remembered when we are considering the work load of the Inspectors. There will be a need for the future Community Physicians to have the closest ties with the Public Health Inspectors for as it is now planned, the new Area Health Board will not have the personnel (itself) or the know-how to carry out these investigations.

On Page 62 details are given of cases of typhoid and paratyphoid notified during the year 1902 to 1970.

During that period, apart from the year 1963, it will be seen that many of the cases contracted the disease outside the town, and in more recent years the infection has usually been contracted abroad.

RUBELLA (GERMAN MEASLES)

1971 was the first complete year of notification of rubella in the Borough and on page 18 I have displayed the incidence of the disease in the town in graphic form.

The graph, shows quite dramatically that the disease took an epidemic form in May of the year.

Our main fear with this disease is not that it affects in any serious way the patient, but the possible danger to the unborn child if a mother contracts the disease in the early weeks of a pregnancy.

I am pleased to report that over 90% of our school girls at the age of 13 years are accepting vaccination against rubella.

During the year, the Department of Health asked that we, in Bedford, should take a particular interest in the reactions which follow the immunisation with rubella vaccine and our preliminary experience would suggest that such reactions which result from immunisation, are of a very mild nature.

HEALTH CENTRES

During the year our policy of providing health centres in the town was confirmed and further discussions were held concerning the adaptations necessary to convert the Putnoe Clinic and neighbouring group surgery into a health centre. Indeed, plans for such adaptations had been submitted to the Department of Health at the end of the year. Discussions also took place regarding the provision of a health centre south of the river, and in the St Peter's area. Further consideration was also given to the provision of General Practitioner facilities at the Medical Centre, Union Street.

On page 30 I have displayed on a map of the Borough the sites of our existing clinics and the proposed Health Centres.

THE HANDICAPPED CHILD

The commonest handicap amongst young children is developmental delay, by which we mean that the child is not doing the things we expect of him at a particular age. The majority of these children catch up later but some of them have a specific handicap such as deafness or spasticity or mental retardation and continue to be slow throughout infancy.

It is most important to recognise these children as early as possible so that specific treatment can be initiated and the child provided with the benefits of education in its widest sense.

On page 40 I have listed those young children whom we know to be handicapped and for whom we are making provision under the Education Act.

By introducing the concept of developmental assessment at regular intervals throughout every child's life, we can expect to recognise more young children with possible handicaps who will need to be observed and assessed at regular intervals. As these numbers grow, so will the need for more provision for their education become apparent.

MIDWIFERY SERVICE

The downward trend of home deliveries was halted in 1971, this I know can only be temporary - awaiting the provision of more maternity beds, for many of the mothers who are delivered at home would prefer to have been confined in hospital. The possibility of a General Practitioner Unit at North Wing would go some way towards satisfying this demand. This is the type of problem which will be more easily resolved with the integration of the three parts of the health service, when the available resources of staff and hospital accommodation can be deployed appropriately.

CERVICAL CYTOLOGY

During the year we took a further step in taking the screening service for cervical cytology out of the clinics into industry.

Following the success of our visits to Telephone House in 1970, we were invited to carry out a similar screening survey at a local main industry in Bedford. Such visits encourage the attendance of those women who are most "at risk" to cervical cancer and we hope to extend this development of our service, for it is our policy not to refuse any invitation which we receive from industry.

This liaison between the Local Health Authority and an on-going Occupational Health Service could be the basis of further development in health screening of the working population. It is an area of our work in which we can expect to see an expansion.

PREVENTABLE DISEASE

I must draw your attention to the table on page 10 which all too clearly shows the toll of deaths resulting from Ischaemic (coronary) Heart Disease.

Progress in preventing death by Ischaemic Heart Disease is possible only by primary prevention which in turn entails controlling those factors known to increase the risk of Ischaemic Heart Disease. Such factors include a diet which is rich in animal fat (resulting in hypercholesterolaemia) high blood pressure, cigarette smoking, and obesity. But it may be that the most significant factor is psychosocial stress. How we respond to the stress of our job or personal relationships could be the major factor in our predisposition to Ischaemic Heart Disease.

Although such factors as hypercholesterolaemia, high blood pressure, obesity and smoking are preventable and respond to treatment, one's reaction to stress may be less amenable to control.

In 1971, 177 of our population, 41 under the age of 65 years, died as a result of this disease and although we have developed a sophisticated system for the screening of carcinoma of the cervix, a relatively rare condition, we do not attempt to screen to detect predisposing factors to Ischaemic Heart Disease.

Is there now a need to establish such a screening service?

IMMIGRANT HEALTH

On page 21 we can see the age distribution of these immigrants who since April 1971 came to reside in the Borough.

This table also shows that the majority of these immigrants were protected against tuberculosis either by previous B.C.G. vaccination or a history of primary infection with tuberculosis.

In view of the continuing high incidence of tuberculosis amongst the immigrants in the Borough, I agreed to link with the Consultant Physicians of the Chest Clinic in screening all recently arrived immigrants in the town for active tuberculosis. This scheme was instigated in April and I propose to pursue a policy of annual follow up of those who are possibly "at risk" to contracting tuberculosis.

During the last few years a few cases of rickets have occurred in the Borough, mainly amongst young children of immigrant parents. Rickets is a disease which is preventable and usually, at this age, results from faulty diet. There is no doubt, that these young children of immigrant mothers are "at risk" to developing rickets and I recognise that there is a need to establish a screening process to determine the true incidence amongst this vulnerable group and to study the nutrition of these children to identify the underlying cause.

There is scope for further research in this area of preventive medicine and we aim to pursue it.

HEALTH EDUCATION

23 men died of lung cancer in 1971!

Are we critical enough of the smoker? He not only shortens his own life but pollutes our environment with his smoke and ash. How often do we see the selfish smoker discard on to the pavement the outer wrapper of his recently purchased packet - so eager is he to get at the cigarettes.

Public opinion is our only weapon; we can but hope that public opinion against the smoker will continue to strengthen.

PERSONAL NEEDS SURVEY

On page 54 of this Report I have included a resume of the results of our personal needs survey of the Borough which, carried out over three years, was completed early in 1971.

We still receive, in this office, completed questionnaires which had obviously been held in reserve and this I suggest may well have been one of the most useful functions of the survey in that many persons have recognised the value of the form as a method of seeking help at sometime in the future.

ALDERMAN L H NICHOLSON

It is with much personal sadness that I have to include in this Report the death of Alderman L H Nicholson, MBE on 1 July 1971.

Alderman Nicholson was a member of the Borough Council for almost 25 years, much of that time in the Chair of the Health Committee. Under his Chairmanship, health and welfare functions were delegated to the Borough in 1960, and it is to be remembered that for some time before this he had been a member of the Northern Divisional Health Committee of the County Council and was no stranger to the functions which were delegated to the Borough.

During his period of office the Diabetic and Glaucoma Surveys were instigated, the policy of "clean air" was pursued, the personal needs survey was steered through its three years and the first steps in the health centre programme were taken. The staff saw him as a friend, his advice was greatly valued by us all and his counsel at this time of change is sadly missed.

J G M MORTIMER
MEDICAL OFFICER OF HEALTH

I VITAL STATISTICS

GENERAL

	Mid Year Registrar-General's Estimate			Census	
	1971	1970	1969	1971	1961
Population of the Borough	72,880 72,880	69,170	68,650	73,229 73,229	63,317
Area of the Borough in acres	6,012	6,012	6,012		
No of inhabited dwellings	23,098	22,520	22,196		
No of Private Householders				23,525	20,391
No of Private Dwellings					18,617
Rateable Value	£4,559,599	£4,302,747	£4,183,595		
Penny Rate Product for the Year	*£44,175	£ 17,800	£ 16,735		

* Change to Decimal Currency

In comparing the two figures of population for 1971 - the census and the estimated one for mid 1971 - it will be noted that the estimate is ~~104~~ lower. The difference between the two figures is comparatively small and should not make any substantial difference on calculation of rates for statistical purposes.

Since we know that there is considerable movement of persons into and out of the Borough we can accept that there will be this difference in these estimates, as the town now houses a considerable number of Commonwealth nationals and aliens, estimated at between 14-17% of the population of the Borough.

VITAL STATISTICS

ACTUAL NUMBERS

		BEDFORD				
		Males	Females	TOTALS		
				1971	1970	1969
Live births	Total	707	618	1,325	1,245	1,325
	Legitimate	641	541	1,182	1,134	1,170
	Illegitimate	66	77	143	111	155
Stillbirths	Total	7	10	17	16	19
	Legitimate	6	9	15	14	15
	Illegitimate	1	1	2	2	4
Total live and still births	Total	714	628	1,342	1,261	1,344
	Legitimate	647	550	1,197	1,148	1,185
	Illegitimate	67	78	145	113	159
Deaths of infants under 1 year of age						
	Total	16	10	26	14	26
	Legitimate	14	9	23	9	22
	Illegitimate	2	1	3	5	4
.....						
under 4 weeks of age						
	Total	11	7	18	8	17
	Legitimate	10	6	16	5	15
	Illegitimate	1	1	2	3	2
.....						
under 1 week of age						
	Total	11	6	17	8	15
	Legitimate	10	5	15	5	13
	Illegitimate	1	1	2	3	2
Deaths - all ages		320	366	686	705	701

RATES

	England & Wales	BEDFORD		
	1971	1971	1970	1969
Live birth rates, etc. -				
Live births per 1,000 home population (Crude rate)	16.00	18.2	18.0	19.3
Area comparability factor	1.00	0.92	0.92	0.92
Local adjusted rate	16.0	16.7	16.6	17.8
Ratio of local adjusted rate to national rate	1.00	1.05	1.04	1.09
Illegitimate live births as percentage of all live births	8	11	9	12
Stillbirth rate -				
Stillbirths per 1,000 live and stillbirths	12	13	13	14
Infant mortality rates -				
Deaths under 1 year per 1,000 live births	18	20	11	20
Deaths of legitimate infants under 1 year per 1,000 legitimate live births	17	19	8	19
Deaths of illegitimate infants under 1 year per 1,000 illegitimate live births	24	21	45	26
.....
Neonatal mortality rate -				
Deaths under 4 weeks per 1,000 live births	12	14	6	13
.....
Early neonatal mortality rate -				
Deaths under 1 week per 1,000 total live births	10	13	6	11
Perinatal mortality rate -				
Stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths	22	25	19	25
Deaths rates, etc. - all ages				
Deaths per 1,000 home population (Crude rate)	11.6	9.4	10.2	10.2
Area comparability factor	1.00	1.07	1.07	1.09
Local adjusted rate	11.6	10.1	10.9	11.1
Ratio of local adjusted rate to national rate	1.00	0.87	0.93	0.93

NUMBER OF DEATHS BY CAUSE, IN SEX AND AGE GROUPS

CAUSE OF DEATH	SEX	All ages	Under 4 weeks	4 weeks & under 1 year	AGE IN YEARS										
					1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75 and over		
Enteritis and other Diarrhoeal Diseases	M	1		1											
	F	1										1			
Tuberculosis of Respiratory System	M	1													
	F														
Late Effects of Respiratory T.B.	M	1										1			
	F														
Other Infective and Parasitic Diseases	M														
	F	1	1									1			
Malignant Neoplasm, Buccal Cavity etc.	M														
	F	1													
Malignant Neoplasm, Oesophagus	M	1									1				
	F	1										1			
Malignant Neoplasm, Stomach	M	7							1	3	3				
	F	6								2	1				
Malignant Neoplasm, Intestine	M	13					1			8	2	3			
	F	20								8	4		8		
Malignant Neoplasm, Larynx	M	1									1				
	F														
Malignant Neoplasm, Lung, Bronchus	M	23						1	3	9	6	4			
	F	2							1		1				
Malignant Neoplasm, Breast	M														
	F	17							3	5	5	4			
Malignant Neoplasm, Uterus	M	1										1			
Malignant Neoplasm, Prostate	M	3										1	2		
Leukaemia	M	1							1						
	F	2									1				
Dther Malignant Neoplasms	M	15				1		2	2	1	4	6	1		
	F	16				1	1				2	6	4		
Benign and Unspecified Neoplasms	M														
	F	1										1			
Diabetes Mellitus	M	3							1	1		1			
	F	9										2	6		
Dther Endocrine etc. Diseases	M	2		1		1									
	F	1											1		
Anaemias	M	1										1			
	F	3									2		1		
Dther Diseases of Blood, etc.	M														
	F	1											1		
Mental Disorders	M	1										1			
	F														
Multiple Sclerosis	M														
	F	1								1					
Dther Diseases of Nervous System	M	1										1			
	F	2								1		1			
Chronic Rheumatic Heart Disease	M														
	F														
Hypertensive Disease	M	2										2	1		
	F	5									1	1			
Ischaemic Heart Disease	M	79							2	11	18	23	25		
	F	98								2	8	25	63		
Dther Forms of Heart Disease	M	8								2	1	2	3		
	F	19										1	18		
Cerebrovascular Disease	M	53									9	15	29		
	F	69								2	5	10	52		
Other Diseases of Circulatory System	M	12									3	2	7		
	F	10									1	1	8		
Pneumonia	M	18										1	3		
	F	21		1							2	4	14		
Bronchitis and Emphysema	M	21								1	4	8	8		
	F	6									3	3			
Asthma	M	1								1					
	F														
Dther Diseases of Respiratory System	M	3		1				1				1			
	F	7	1		1							3	2		
Peptic Ulcer	M	4													
	F	3									3	1			
Intestinal Obstruction and Hernia	M	2													
	F	1	1								1		1		
Cirrhosis of Liver	M	1						1							
	F	1													
Other Diseases of Digestive System	M	4									1	2	1		
	F	3								2			1		
Nephritis and Nephrosis	M														
	F	2										1			
Hyperplasia of Prostate	M	1										1			
Other Diseases, Genito-Urinary System	M	3								1	1		1		
	F	9							1	1	1	3	3		
Diseases of Skin, Subcutaneous Tissue	M														
	F	1											1		
Diseases of Musculo-Skeletal System	M	1									1				
	F	2										1	1		
Congenital Anomalies	M	8	3	2	1	1				1					
	F	2	1	1											
Birth Injury, Difficult Labour, etc.	M	6	6												
	F	3	3												
Symptoms and Ill Defined Conditions	M	3										2	1		
	F														
Motor Vehicle Accidents	M	9				1	4	2	1						
	F	2					1					1			
All Other Accidents	M	4					1		1						
	F	11		1						1	3		1		
All Other External Causes	M	1											1		
	F														
TOTAL ALL CAUSES	M	320	11	5	1	3	6	4	8	24	70	86	102		
	F	366	7	3	1	1	2	9	14	42	82	204			
TOTAL		686	18	8	2	4	7	6	17	38	112	168	306		

11. ENVIRONMENTAL CIRCUMSTANCES AND GENERAL SERVICES

1. SEWAGE AND SEWAGE DISPOSAL, REFUSE COLLECTION, STREET CLEANSING AND SHOWER BATHS

I am indebted to the Chief Engineer for the following report:

Sewerage and Sewage Disposal

The extensions now under construction at the Sewage Treatment Works will be commissioned in the early summer of 1972. The Works will then have ample capacity for several years, at the present growth of the Borough and area served, to treat the sewage to the higher standards required by the River Authority.

There have recently been unsatisfactory analytical reports from the River Authority on the effluents due to general overloading of the Works and to disruption of treatment processes during the Works extension.

A new stormwater sewer is being constructed from Foster Hill Road (Albert Street) to Dame Alice Street (Telephone House) to relieve the existing sewerage system and to supersede an old culvert, the condition of which gives rise to concern. Design work is proceeding on a stormwater relief sewer scheme to alleviate flooding in the Elstow Road district.

Refuse Collection

The service for collecting domestic and trade refuse has continued to satisfy the demands made upon it which have included special collections of bulky and other items requiring special attention. The number of paper sacks needed for domestic refuse has increased to meet the greater volume of refuse.

For five months during the year a successful experimental scheme was undertaken in providing bulk containers at suitable sites for fortnightly periods. The public made full use of the facilities for the disposal of some 2,500 tons of bulky rubbish.

Street Cleansing

Good standards of street cleansing have been achieved throughout the year having regard to the age of two of the mechanical sweepers which at the end of the year have been replaced.

Shower Baths

The shower baths at the multi-storey car parks have been used by 4,250 during the year, as under:

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Allhallows	2,200	150	2,350
Lurke Street	1,900	-	1,900
	4,100	150	4,250

2 WATER

The Engineer and Manager of the Bedfordshire Water Board has kindly supplied the following report:

Bacteriological Results Year Ended 31 March 1971

- (i) The water supply has been satisfactory in quality and quantity.
- (ii) A summary of the bacteriological examinations of the raw water and of the water going into supply is given below:

Source River Great Ouse (Bedford)

Year ended 31 March 1971

Origin of Sample	No of Samples	Average No of presumptive Coliforms in 100ml	Average No of Bact. Coli in 100ml
Raw River Water	52	6,645	2,080
Leaving Treatment Works	781	Nil	Nil
Distribution System in Bedford	82	Nil	Nil

- (iii) No lead in solution. Water not plumbo-solvent.
- (iv) All work on mains is followed by chlorination and sampling by Board's Chemist.
- (v) All houses supplied by public water mains direct, except two in Cardington Road.
- (vi) Chemical analyses of raw and treated water are given in the attached table.

BEDFORDSHIRE WATER BOARD

Bedford River Ouse Source

Chemical Analysis of Raw and Treated Water

for year ended 31 March 1971

	Raw Water		Treated Water	
	Range	Average	Range	Average
Turbidity (ATU)	6-130	20	Nil-5.0	0.5
Colour (Hazen Units)	4-66	18	1-15	5
Reaction pH	7.71-8.82	8.04	7.07-8.13	7.66
Electric Conductivity (Reciprocal Megohms per ml at 20°C)	490-870	715	500-880	705
Ammoniacal Nitrogen	Nil-1.00	0.13	Nil-0.96	Nil*
Albuminoid Nitrogen	0.14-0.91	0.32	0.10-0.40	0.18
Nitrate/Nitrite Nitrogen	1.6-13.0	5.8	1.9-12.9	5.7
Oxygen Absorbed in 4 hours at 27°C	1.5-7.0	2.8	0.6-2.3	1.1
Anionic Detergent	0.02-0.20	0.11	0.02-0.12	0.07
Chloride as Cl	24-63	46	30-72	54
Total Hardness as CaCO ₃	278-422	358	266-410	335
Total Hardness, degrees Clark	19-30	25	19-29	23
Carbonate Hardness as CaCO ₃	132-250	215	94-220	167
Non-Carbonate Hardness as CaCO ₃	92-200	143	117-244	168
Calcium as CaCO ₃	250-386	325	250-376	302
Magnesium as CaCO ₃	20-46	33	24-46	33
Free Carbon Dioxide	-	4	-	7
Fluoride as F	0.15-0.30	0.21	0.09-0.23	0.16
Sodium as Na	11-59	29	11-57	29
Potassium as K	4-11	7	4-11	7
Iron as Fe	0.14-4.48	0.61	Nil-0.28	0.05
Lead/Copper/Zinc	-	Nil	-	Nil
Silica as SiO ₂	2-19	7.3	1-12	4.9
Orthophosphate as PO ₄	0.55-4.4	1.8	Nil-0.70	0.16
Chlorophyll A in mg per m ³	1-147	17.5		
Algae Cells per ml	3-55,000	4,950		
Sulphate as SO ₄	109-182	140	122-189	152

Results in Milligrammes per Litre

*Ammonia was present in the treated water only when sterilisation depended on chloramination, ie for three days only

R J ELAM
Engineer and Manager

Bacteriological Examinations

(Undertaken by Public Health Laboratory Service)

UNTREATED AND DRINKING WATER					
Origin of Sample	No of Samples	Presumptive Coliforms per 100 ml		Faecal Coliforms per 100 ml	
		Highest	Lowest	Highest	Lowest
Fully Treated Water	56	2+	-	2+	-
Wells	12	25	-	2+	-
Pumping Station	5	3500	350	1800+	25
SWIMMING BATHS					
Newnham	4	-	-	-	-
Robinson	67	-	-	-	-
Schools	233	2+	-	2+	-

Faecal Coliforms were found in only three samples (one each of fully treated water; a well; and school swimming bath.) Repeat samples showed no contamination.

FLUORIDATION

The decision of the Bedfordshire County Council in the latter part of 1970 to rescind its approval of the introduction of fluoridation, again became a matter of contention in 1971.

Just prior to the compilation of this Report the Council had reverted to its original decision to adopt fluoridation of the local water supplies.

The Bedford Borough Council in September 1962 approved the addition of fluoride to water supplies, and in March 1970 endorsed this decision.

3 ENVIRONMENTAL POLLUTION

In the country generally much concern has been expressed in the matter of possible pollution of water supplies, indiscriminate dumping of both industrial and household waste, and air pollution.

In the past year attention has been paid to this problem and I am pleased to state that up to the moment no serious situation has arisen.

However, inspections have been made of possible sources of danger and included in these were: the paddling pool at Longholme; Bedford Park Lake; the stream flowing through the Silver Jubilee Park; sludge disposal at the Sewage Treatment Works; and the river flowing through the town centre.

The Bedford Council is taking the following steps:

- 1 To provide a form of chlorinating plant at the Longholme Paddling Pool.
- 2 To cleanse and reline the Bedford Park Lake and to provide an efficient form of aeration.
- 3 The Health Committee is to consider the results of samples taken over a period of six months from the Silver Jubilee Park stream.

Proposals have also been put forward for the culverting of this stream through the Park.

In addition a national report on the rivers in the country, recorded that some pollution of the River Great Ouse was, in fact, occurring but this was not of a serious nature.

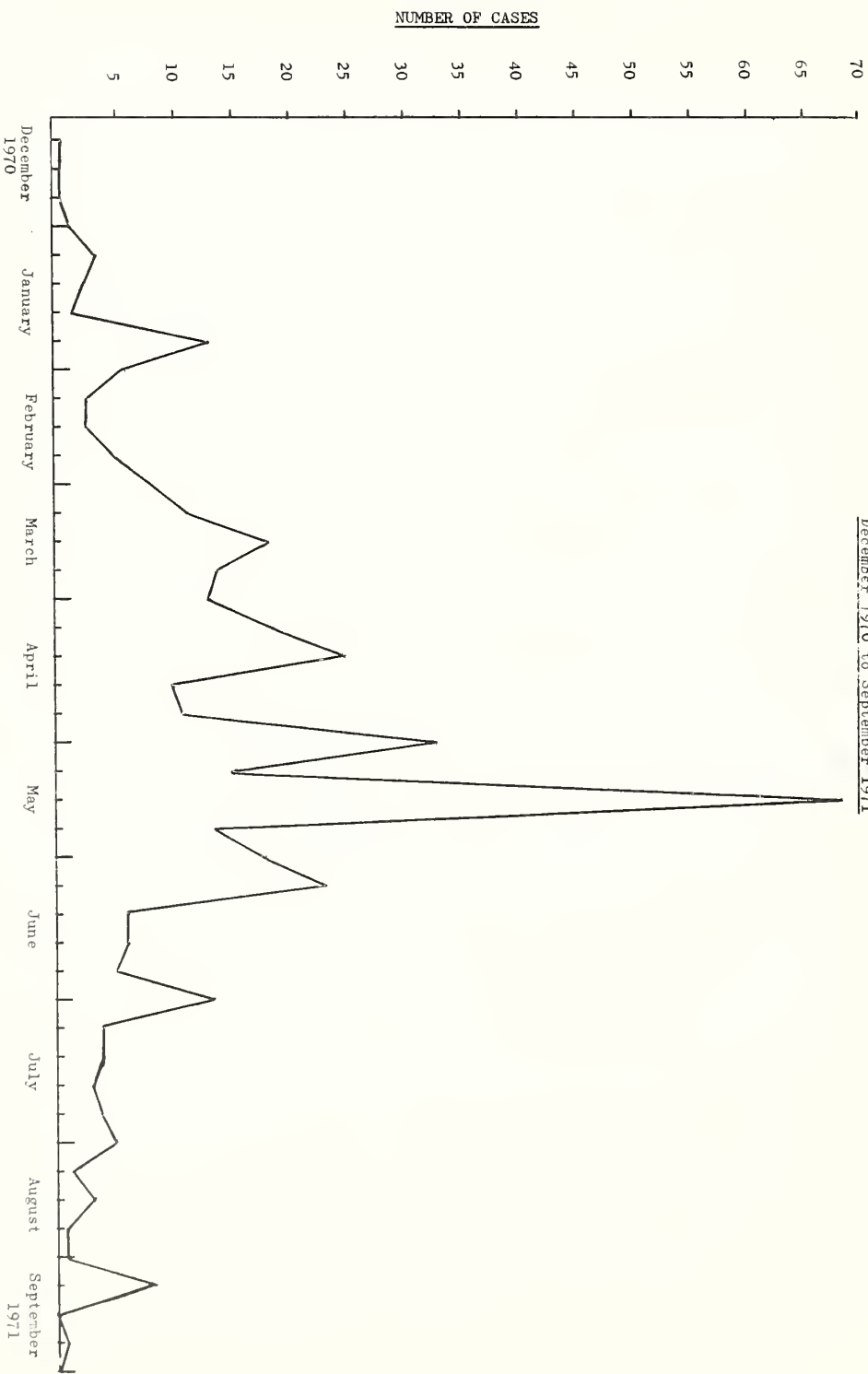
Discussions with officers of Departments concerned, have been held on the subject of sewage sludge. Examination and inspection of its disposal did not produce sufficient evidence to imply that pollution of the land on which sludge is sprayed, was occurring.

III. INFECTIOUS DISEASES

1. INFECTIOUS DISEASES OTHER THAN TUBERCULOSIS

	No. of cases notified		
	1971	1970	1969
Rubella	412	14	-
Measles	171	197	637
Dysentery	32	10	40
Scarlet Fever	14	14	20
Whooping Cough	8	19	1
Infective Jaundice	10	12	10
Diphtheria	-	-	-
Tetanus	-	-	-
Acute Meningitis	2	-	-
Acute Encephalitis:			
Infective	-	-	-
Post Infectious	-	-	-
Acute Poliomyelitis:			
Paralytic	-	-	-
Non-Paralytic	-	-	-
Leptospirosis	-	-	-
Paratyphoid Fever	-	-	-
Typhoid	1	1	3
Food Poisoning	9	8	15
Malaria:			
Contracted - In Gt. Britain	-	-	-
naturally Abroad	-	-	-
Induced - Accidentally	-	-	-
Therapeutically	-	-	-
Plague	-	-	-
Cholera	-	-	-
Anthrax	-	-	-
Smallpox	-	-	-
Typhus Fever	-	-	-
Relapsing Fever	-	-	-
Yellow Fever	-	-	-

RUBELLA NOTIFICATIONS
December 1970 to September 1971



Dysentery

Early in the year there was an outbreak of dysentery in the Bedford Day Nursery - this outbreak had an explosive onset for on investigation we found that many of the children were already carriers although they had no symptoms. In spite of the strictest precautions, new cases continued to develop and the outbreak was finally brought to an end by the exclusion of all carriers although they had no symptoms. Subsequent to this outbreak, all new admissions to the Nursery are screened to exclude any possible carrier.

Measles

It will be noticed that the number of cases notified decreased substantially over those notified in previous years. No doubt the vaccination scheme is now proving its worth.

Cholera

Following upon an outbreak in Europe in the late summer, persons entering this country who had been in an infected area were required to possess a valid international certificate of vaccination against cholera.

Persons who were not in possession of the international certificate of vaccination were placed under surveillance for five days.

Forty-nine persons who had been abroad and who had been in an infected area were visited on return to Bedford because they had no certificate. All were well.

2. TUBERCULOSIS

Notification of new cases

Age Range	Respiratory		Non-Respiratory		Total		
	M	F	M	F	1971	1970	1969
Under 1 year	-	-	-	-	-	-	-
1 year	-	-	-	-	-	-	-
2-4 years	1	1	-	-	2	3	1
5-9 years	1	-	-	-	1	-	1
10-14 years	-	1	-	-	1	-	-
15-19 years	1	-	1	-	2	1	3
20-24 years	-	1	-	-	1	5	5
25-34 years	3	-	1	-	4	12	5
35-44 years	2	1	2	2	7	6	5
45-54 years	1	1	-	-	2	9	3
55-64 years	2	2	-	3	7	5	2
65-74 years	1	1	-	-	2	-	1
75 and over	-	2	-	-	2	1	-
Totals	12	10	4	5	31	42	26

In the total for 1971 are included 12 persons from the Commonwealth

NUMBER OF CASES ON REGISTER

	1971	1970	1969
Pulmonary	220	206	220
Non-Pulmonary	74	82	74
TOTAL	294	288	294

SCREENING FOR TUBERCULOSIS IN RECENTLY ARRIVED IMMIGRANTS (APRIL - DECEMBER 1971)

RESULTS OF HEAF TESTING

Country of Origin	Results of Test	AGE							Totals
		0 - 1	2 - 4	5 - 12	13 - 16	17 - 44	45 - 64	65 -	
India	Protected	-	2	1	6	12	4	-	25
	Not Protected	2	1	10	2	2	1	-	18
Pakistan	Protected	-	-	3	2	4	1	-	10
	Not Protected	1	-	1	-	-	-	-	2
West Indies	Protected	-	-	2	1	2	-	-	5
	Not Protected	-	-	1	2	-	-	-	3
E. Africa	Protected	-	-	1	2	4	1	-	8
	Not Protected	-	-	-	-	1	-	-	1
U.S.A.	Protected	-	-	-	-	-	-	-	-
	Not Protected	-	-	-	-	2	-	-	2
Italy	Protected	-	-	-	-	-	2	-	2
	Not Protected	-	-	-	-	1	-	-	1
China	Protected	-	-	-	-	-	2	-	2
	Not Protected	-	-	-	-	-	-	-	-
TOTALS	Protected	-	2	7	11	22	10	-	52
	Not Protected	3	1	12	4	6	1	-	27

3 MASS RADIOGRAPHY

I am indebted to the Director of the Mass Radiography Service for the following report:

Weekly sessions Town Square, Bedford

No. X-rayed	2,683
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<u>Public Survey</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Queen's Drive	54	180	234
St. Peter's	131	244	425
Empire Cinema	120	351	481
Market Square	583	386	974
Commercial Road	70	76	146
	1013	1247	2260

<u>Firms Survey</u>			
Texas Instruments	595	805	1400
Geo. Fischer Ltd.	549	130	679
Meltis Limited	163	280	448
W.H. Allen	1137	190	1327
Brookhirst Igranic	756	298	1054
Granada T.V. Rentals	154	243	407
County Hall Employees	260	197	457
Unilever Ltd.	520	242	762
Sundry Small Groups	1107	787	1894
	5256	3172	8428

<u>Schools & Colleges Survey</u>			
College of Education	14	168	182
College of Physical Education	6	149	155
Bedford Modern School	311	-	311
Bedford School	539	1	590
	920	318	1238

Unfortunately the results of these examinations will not be collated until after the compilation of this report but I would hope to include this information in a subsequent report.

IV VACCINATION AND IMMUNISATION

All children born on and after 1 January 1968, and living in the Borough are "on the computer".

A child's name is added to the computer file when the birth is notified; on her first visit the Health Visitor will discuss with the mother how the child can be protected from certain infectious diseases and will agree with her how the child is to obtain this protection, either by attending her own general practitioner or the local child health clinic.

These facts are fed into the computer and subsequently post cards will be sent to the home advising the mother of the child's next appointment.

In giving these appointments the computer programme follows the most recent schedule advised by the Department of Health, ie

Age	Prophylactic	Dose	Interval
During the first year of life	Diphtheria, Whooping Cough Tetanus and Poliomyelitis Vaccine	1st 2nd 3rd	at 4 months after 6-8 weeks after 5-6 months
During the second year of life	Measles Vaccine	Single	after 4 weeks
5 Years	Diphtheria, Tetanus and Poliomyelitis vaccine	Booster	at school entry

Vaccination against Smallpox

During the year the Joint Committee on Vaccination and Immunisation which advises the Central Government, reviewed the indications for offering vaccination against smallpox in Great Britain. Although vaccination remains the most reliable measure for the protection of individuals liable to be exposed to this disease it is a procedure which has a small but finite risk of serious complications. Changes in the revalence of smallpox in countries overseas and the diminishing likelihood of the occurrence of outbreaks in this country have prompted a re-assessment of the balance of the risks involved.

The Committee expressed the opinion that vaccination against smallpox need not now be recommended as a routine procedure in early childhood but emphasised that all travellers to and from areas of the world where smallpox is endemic or countries where eradication programmes are in progress should be protected by recent vaccination. Although primary vaccination in adult life also carries a risk of complications, recently compiled data indicate that this is not so great as to justify routine vaccination in childhood in the hope of reducing the risk to adults. The Committee also emphasised the importance of the vaccination and regular re-vaccination of all health service staff who come into contact with patients, such as hospital doctors, and nurses, public health staff and ambulance workers as long as any risk of importation of smallpox remains. Past experience has shown that health service staff are particularly liable to be exposed to infection after an importation of smallpox.

The Secretary of State has accepted the Joint Committee's advice that:

- (1) Vaccination against smallpox need not now be recommended as a routine procedure in early childhood.
- (2) All travellers to and from areas of the world where smallpox is endemic or countries where eradication programmes are in progress should be protected by recent vaccination.
- (3) Health Service staff who come into contact with patients should be offered vaccination and regular re-vaccination.

As a result of this review and on the advice of the Chief Medical Officer, Department of Health and Social Security, and in consultation with the County Medical Officer of Health, it has been decided that routine vaccination of children will no longer be carried out at our clinics.

The following tables show the number of children vaccinated and immunised.

SMALLPOX

No of Persons Vaccinated						
No of Primary Vaccinations				No Re-Vaccinated		
	1971	1970	1969	1971	1970	1969
TOTAL	641	738	1003	623	653	622
Children up to 15 years	568	649	898	131	126	76
Over 15 years	73	89	105	492	527	546

DIPHTHERIA, PERTUSIS, TETANUS, MEASLES, POLIOMYELITIS, RUBELLA

Completed Courses:- Number of Persons under Age 16

Type of Vaccine	Year of Birth					Others under age 16	Total
	1971	1970	1969	1968	1964-1967		
Quadruple DTP	-	-	-	-	-	-	-
Triple DTP	23	777	78	15	4	1	898
Diphtheria/ Pertussis	-	-	-	-	-	-	-
Diphtheria/ Tetanus	-	10	1	-	98	50	159
Diphtheria	-	-	-	-	5	4	9
Pertussis	-	-	-	-	-	-	-
Tetanus	-	-	-	-	1	95	96
Poliomyelitis	22	785	79	15	105	129	1,135
Measles	1	527	170	32	136	39	905
Totals -							
Diphtheria	23	787	79	15	107	55	1,066
Whooping Cough	23	777	78	15	4	1	898
Tetanus	23	787	79	15	103	146	1,153
Poliomyelitis	22	785	79	15	105	129	1,135
Rubella (German Measles)						1,724	1,724

DIPHTHERIA, PERTUSSIS, TETANUS, MEASLES, POLIOMELITIS

Re-inforcing Doses - Number of Persons Under Age 16

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1971	1970	1969	1968	1964- 1967		
Quadruple DTPP	-	-	-	-	-	-	-
Triple DTP	-	-	2	3	88	7	100
Diphtheria/ Pertussis	-	-	-	-	-	-	-
Diphtheria/ Tetanus	-	-	-	-	961	103	1,064
Diphtheria	-	-	-	-	10	12	22
Pertussis	-	-	-	-	-	-	-
Tetanus	-	-	-	-	11	535	546
Poliomyelitis	-	-	2	3	1,030	571	1,606
Totals -							
Diphtheria	-	-	2	3	1,059	122	1,186
Whooping Cough	-	-	2	3	88	7	100
Tetanus	-	-	2	3	1,060	645	1,710
Poliomyelitis	-	-	2	3	1,030	571	1,606

TUBERCULIN TESTING - HEAF METHOD - SCHOOL ENTRANTS

	1971	1970	1969
Consent given	1,158	1,044	1,045
Consent not given	192*	156	159*
No of children tested	1,003	875	878
No found to be negative	962	855	818
No found to be positive	41	20	60
Absent from school at time of test	134	140	147
Left school before test given	21	29	20

* Of these numbers the greater part had received B.C.G. vaccination, or were under observation at the Chest Clinic

TUBERCULIN TEST AND B.C.G. VACCINATION
CHILDREN 13 YEARS AND UPWARDS

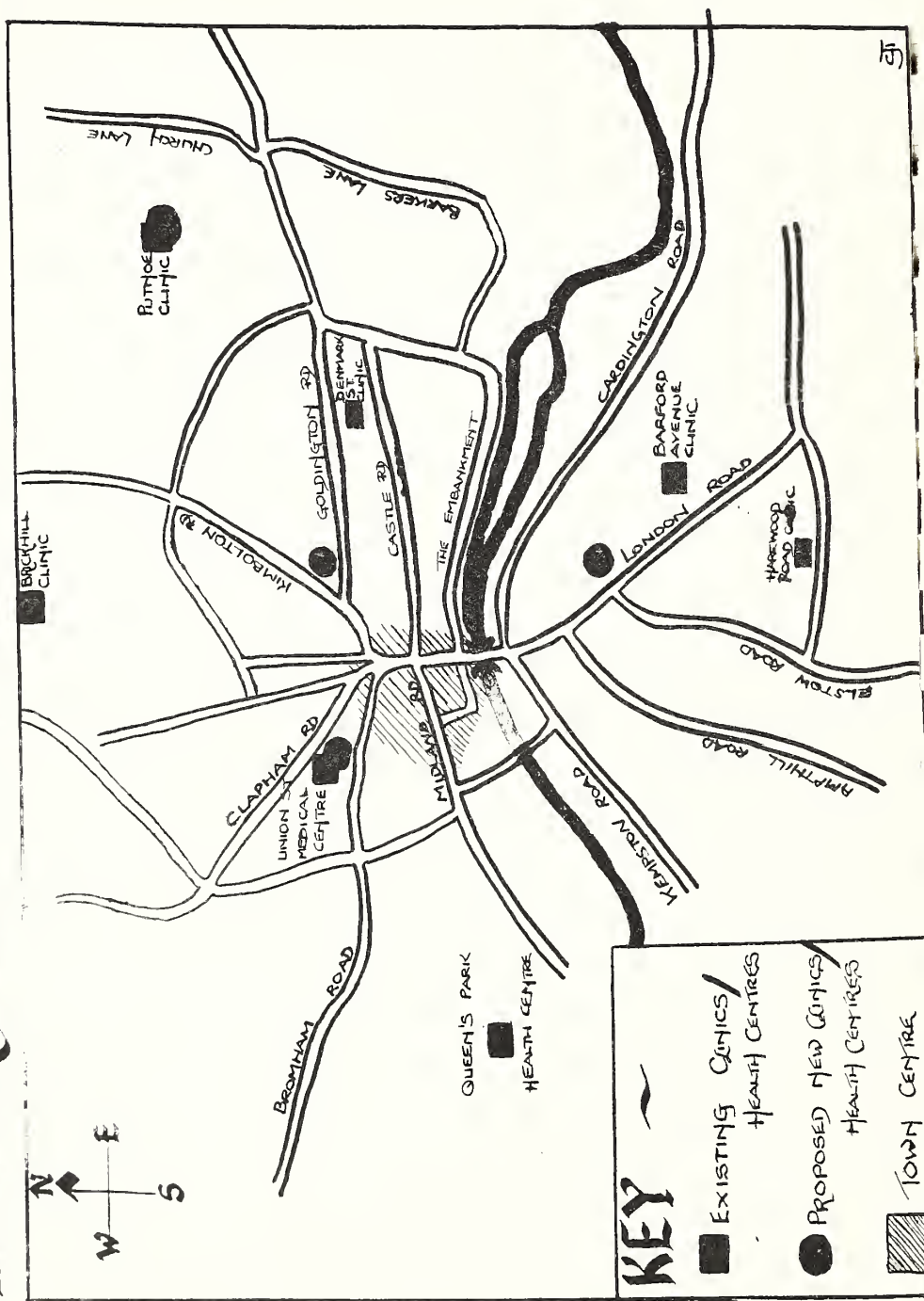
School Children and Students

	1971	1970	1969
No. skin tested	1,550	1,166	1,179
No. found positive	218	182	165
No. found negative	1,208	911	926
No. vaccinated	1,205	911	925
For B.C.G. vaccination later	3	-	1
Test not read	79	44	68
No. who had been vaccinated previously	45	29	20

V HEALTH CENTRES AND CLINICS

1 Location

BEDFORD - MAIN TRAFFIC ROUTES WITH CLINICS AND HEALTH CENTRES.



	*Medical Centre Union Street				*Hutene Queens Drive	*Brickhill Linnel Way	*Queens Park Carlisle Road	*Barford Avenue	Denmark Street	Harewood Road
	Ground Floor		First Floor							
	Left	Right	Left	Right						
MONDAY Morning	Orthoptics Speech Therapy Audiometry	Doctors' Session (S.H.S.)	Dental Orthodontics	Child Guidance	Chiropody Occupational Therapy (Fortnightly)	Childrens Assessment Group District Nurses Mothers and Babies District Nurses	Dental (from 1.1.72) Group Surgery	Mothers and Babies		
Afternoon	Orthoptics Speech Therapy Audiometry		Dental Orthodontics	Child Guidance	Mothers and Babies Immunisation Chiropody		Dental Club for the disabled Group Surgery			
Evening				Youth Counselling Service (1st, 3rd & 5th)						
TUESDAY Morning	Orthoptics Speech Therapy	Minor Ailments Cytology (Fortnightly)	Dental Orthodontics	Child Guidance	Blind Handicrafts Speech Therapy	Brickhill Play Group District Nurses	Dental Mentally Handicapped Children's Play Group Group Surgery	Chiropody		
Afternoon	Orthoptics Speech Therapy	Mothers & Babies Immunisation	Dental Orthodontics	Child Guidance	Mothers & Babies	Club for the Disabled (Fortnightly) District Nurses	Dental Mothers & Babies Immunisation Group Surgery	Chiropody		
Evening		Family Planning Association								
WEDNESDAY Morning	Orthoptics Speech Therapy	Minor Ailments Birth Control (IUD)	Dental Orthodontics	Child Guidance	Occupational Therapy	District Nurses	Speech Therapy Group Surgery	Birth Control		
Afternoon	Orthoptics Speech Therapy	Mothers & Babies	Dental Orthodontics	Child Guidance		Mothercraft (Fort- nightly) Midwives Bookings (Fortnightly) District Nurses	Mothercraft (fortnightly) Midwives Bookings (fortnightly) Group Surgery Group Surgery	Mothercraft Blind Handicrafts		Mothers & Babies Immunisation
Evening		Family Planning Association (Fortnightly)								
THURSDAY Morning	Orthoptics Speech Therapy	Minor Ailments Dept. of Health and S.S.	Dental Orthodontics	Child Guidance	Birth Control	Blind Handicrafts District Nurses	Group Surgery			
Afternoon	Orthoptics Speech Therapy	Mothercraft (Fortnightly) Midwives Bookings (Fortnightly)	Dental Orthodontics	Child Guidance	Mothercraft (fort- nightly) Midwives Bookings (Fortnightly)	Mothers & Babies Immunisation District Nurses	Blind Handicrafts Group Surgery	Mothers & Babies Immunisation		
Evening		Diabetic Research 4pm onwards					Group Surgery	Alcoholics Anonymous		
FRIDAY Morning	Orthoptics Speech Therapy	Minor Ailments Dept. of Health & S.S.	Dental Orthodontics	Child Guidance		Brickhill Playgroup District Nurses	Group Surgery	Doctors' Session (S.H.S.) (fort- nightly) Chiropody		
Afternoon	Orthoptics Speech Therapy	Dept. of Health & Blood Trans Service (Monthly)	Dental Orthodontics	Child Guidance	Blind Handicrafts (Fortnightly) Occupational Therapy (Fortnightly)	Family Planning Association District Nurses	Group Surgery	Chiropody Speech Therapy	Mothers & Babies Immunisation (Fortnightly)	
Evening							Group Surgery			
SATURDAY Morning							Group Surgery			

* NOTE: Health Visitors and Clinic Nurses are available at these Centres and Clinics between 9 am and 10 am.

VI MATERNITY AND CHILD HEALTH

1 ANTENATAL CARE - MOTHERCRAFT CLASSES

	Barford Avenue	Brickhill	Putnoe	Queen's Park	Union Street	Total		
						1971	1970	1969
No. of Sessions	46	32	42	7	30	157	130	160
No Attending	33	25	59	6	24	147	127	215
Total Attendances	237	111	220	33	90	691	598	777

2 MIDWIFERY SERVICE

	Total		
	1971	1970	1969
No of domiciliary confinements	214	203	282
Percentage of total adjusted births	15.9	16.1	21.1
Early discharge from hospital to care of midwife	456	467	407
No of visits to expectant mothers to assess suitability of home circumstances for confinement	284	322	280
No of these recommended for hospital confinement	183	216	211

The midwives case load was similar to the previous year, and the work was undertaken in its usual quiet but efficient way. Student midwives (usually from the local hospital) undertake a certain amount of domiciliary training with the district midwives - an arrangement which has worked very well over the past years.

Each midwife is required to attend a refresher course at a recognised Centre at regular intervals during her period of service with the Authority.

The midwives operate from their own homes, but attend clinics at specified times for bookings, etc.

3 NOTIFICATION OF CONGENITAL DEFECTS APPARENT AT BIRTH

	TOTAL		
	1971	1970	1969
CONGENITAL DEFECT OF:			
CENTRAL NERVOUS SYSTEM	5	-	1
EYE AND EAR	-	-	-
ALIMENTARY SYSTEM	2	1	1
HEART AND CIRCULATORY SYSTEM	5	-	1
RESPIRATORY SYSTEM	-	-	-
URINO-GENITAL SYSTEM	-	1	3
LIMBS	11	7	5
OTHER PARTS OF MUSCULO SKELETAL SYSTEM	-	-	-
OTHER SYSTEMS	-	1	-
OTHER MALFORMATIONS	2	5	1
	25	15	12

4. CHILD HEALTH CENTRES

	Barford Ave	Brickhill	Denmark Street	Harewood Road	Putnoe	Queens Park	Union Street	Total	Comparative Totals for Previous Years	
								1971	1970	1969
No. of Sessions	100	100	51	52	99	51	103	557	560	552
No. of Children who attended who were born in current year born in previous year born in other years	148	159	128	40	265	127	197	1,064	1,095	1,088
	111	152	124	31	211	146	215	990	1,094	1,190
	62	177	57	19	209	74	114	712	802	950
Total	321	488	309	90	685	347	526	2,766	2,991	3,228
Total Attendances	4,186	3,957	2,671	2,014	4,464	2,390	3,135	22,817	24,144	21,968

SCREENING FOR DEAFNESS IN PRE SCHOOL HANDICAPPED CHILDREN

At the age of 7 - 9 months the Health Visitor screens every child in her practice for possible deafness.

Those who fail two such screening tests are referred to a Special Audiology Clinic where a Medical Officer and the Teacher of the Deaf see the child and mother, and carry out a full assessment of the hearing. Those children in whom a defect of hearing is confirmed are referred to Consultant Otologists who are able to provide specific hearing aids.

AUDIOLOGY CLINIC

	1971	1970	1969
No of Sessions	10	8	9
No of Examinations	40	23	38
No of Individual Cases	33	16	24

6. DENTAL CARE

A. CLINIC ATTENDANCES AND TREATMENT	Children 0-4 (incl.)	Expectant & Nursing Mothers
First Visits	152	42
Subsequent Visits	254	108
Total Visits	406	150
No. of additional courses of treatment other than first course	11	6
No. of fillings	278	97
No. of Teeth filled	227	92
No. of Teeth extracted	201	40
No. of General Anaesthetics given	64	5
No. of emergency visits	3	3
No. of patients X-rayed	3	11
No. of patients treated by scaling etc. (prophylaxis)	111	19
Teeth otherwise conserved	5	
Teeth root filled		1
Inlays		2
Crowns		-
No. of courses of treatment completed during the year	141	28
B. PROSTHETICS		
Patients supplied with F.U. or F.L.*	-	-
Patients supplied with other dentures	-	2
No. of dentures supplied * (First time)		2
C. ANAESTHETICS		
Administered by Dental Officers	2	
D. INSPECTIONS		
No. of patients given 1st inspection during the year	(A) 183	(D) 29
No. of patients in (A) & (D) above who required treatment	(B) 102	(E) 29
No. of patients in (B) & (E) above who were offered treatment	(C) 102	(F) 29
No. of patients re-inspected during year	6	1
E. SESSIONS		
No. of Dental Officer Sessions devoted to Maternity & Child Health Sessions for treatment for health education	58.8 -	

Mr. H.W.S. Sheasby, Chief Dental Officer reports as follows:-

"In 1971 the dental staff serving the Borough Clinics remained on the whole as in the previous year. Mr Wilcox, the Area Dental Officer for Bedford, received support from several of the County Dental Officers and from a Dental Auxiliary.

The new dental centre planned for Queen's Park was not quite completed by the builders at the end of the year. Treatment, therefore, continued to be provided at the Union Street and Queen's Drive static clinics, and in the old mobile clinic stationed at Pearcey Road School and used in lieu of a static centre. This vehicle is about to be replaced by another one which can be moved from school to school, thus enabling it to give better service south of the river.

The treatment of nursing and expectant mothers and of children under school age continued very much as before with the same rather slow growth. We regard the treatment of the teeth of very young children as a necessary foundation for our work in the school dental service, because it does reduce the severity of dental trouble later when the children reach school. It also affords these very young patients an easier and more pleasant introduction to dental treatment. The Dental Auxiliary again did a very valuable share of the work for this group."

7. WELFARE FOODS
DISTRIBUTION

	Total		
	1971	1970	1969
Packets of National Dried Milk	4,687	5,495	5,502
Bottles of Orange Juice	18,913	19,856	17,080
Bottles of Cod Liver Oil	613	994	899
Packets of A & D Tablets	659	710	591
Bottles of A,D & C Drops	1,162	-	-
Sale of Proprietary Foods - Income	£7,500	£7,500	£7,200

Under new arrangements whereby improvements/modifications were brought into being during the year, cod liver oil ceased to be available as from the 1st April from the Department of Health and Social Security.

Orange juice was subsequently withdrawn on the 31st December (although existing stocks were on sale until they were exhausted).

Both the above products were replaced by bottles of A.D. & C. drops - actually these were available from the 1st April before the withdrawal of orange juice.

As the demand for orange juice is still considerable and as supplies are still available direct from the manufactures, arrangements are being made for its sale to be continued at the clinics after 1 January 1972.

8. PLACEMENT OF PRE-SCHOOL HANDICAPPED CHILDREN

During recent years we have been expending more and more effort on such assessment in the pre-school years and endeavouring to use the available, as yet limited, pre-school provision to the best advantage to lessen the educational handicap which might otherwise befall the disabled child.

Page 40 details the type of handicap and provision which we are making for those pre-school children who appear to be handicapped. The more efficient the process of assessment and the more adequate the special pre-school provision, the less will be the anxiety and frustration of the parents, for let us not forget the need to involve the parents in the process of assessment of any pre-school handicapped child. Support is also available to parents through the good offices of the various voluntary associations, who take a specific interest in handicapped children, and those voluntary organisations must be encouraged to establish and maintain their rightful place in the total care of the handicapped child and his parent.

PLACEMENT OF PRE-SCHOOL HANDICAPPED CHILDREN

	Brickhill Assessment Play Group				Bedford Day Nursery				Drayton House				Italian Day Nursery				Whiston Rd. Unit Northampton				Parkdene PHU				Priony SP Unit				Private Play Group				Queens Park Mentally Hand. Play Group				Not Placed Yet			
	1969	1968	1967	1966 Sept-Dec	1969	1968	1967	1966 Sept-Dec	1969	1968	1967	1966 Sept-Dec	1969	1968	1967	1966 Sept-Dec	1969	1968	1967	1966 Sept-Dec	1969	1968	1967	1966 Sept-Dec	1969	1968	1967	1966 Sept-Dec	1969	1968	1967	1966 Sept-Dec	1969	1968	1967	1966 Sept-Dec				
Year of Birth																																								
Blind																	1																							
Partially Sighted																																								
Deaf																																								
Partially Hearing				1	1														1	1															2					
Delicate																																				1				
Epileptic																																				1				
Maladjusted																																								
Mentally Retarded												1																								1				
Severely Subnormal													1																						2	1				
Physically Handicapped													1	4	1																				1					
Speech Defect																																				2				
Undiagnosed																																								
TOTALS	-	1	6	-	1	1	1	-	1	5	1	2	1	-	-	-	1	-	-	1	-	2	2	-	-	1	-	-	-	2	-	1	4	8	6					

VII HEALTH VISITING

	Number of Cases Visited			
	Total			
	1971	1970	1969	
1 Total number of cases	5,930	3,938	4,677	
2 Children born in current year	1,362	1,302	1,319	
3 Children born in previous year	1,330	849	772	
4 Children born in previous four years	1,779	1,034	1,344	
5 Total number of children in lines 2 - 4	4,471	3,185	3,435	
6 Persons aged 65 or over	645	466	707	
7 No. included in line 6 who were visited at the special request of a G.P. of hospital	75	59	52	
8 Mentally disordered persons	39	20	15	
9 Number included in line 8 who were visited at the special request of a G.P. or hospital	11	1	1	
10 Persons excluding Maternity cases discharged from hospital (other than mental hospitals)	46	26	20	
11 Number included in line 10 who were visited at the special request of a G.P. or hospital	20	11	12	
12 Number of tuberculous households visited	4	1	4	
13 Number of households visited on account of other infectious diseases	52	20	38	
14 Other cases	466	367	458	

ATTACHMENT OF HEALTH VISITORS

In the Autumn of the year all Health Visitors were attached to general practitioners, although remaining stationed at the Health Centre or Clinics. The trial attachments which commenced in 1966 proved to be worthwhile. We are, therefore, expecting that the increased liaison between General Practitioners and Health Visitors resulting from attachment, will be to the advantage of both patients and professional staff.

VIII HOME NURSING SERVICE

	1971	1970	1969
No of persons nursed	1,858	1,860	1,624
No of persons nursed aged under 5 years	65	63	44
No of persons nursed aged 65 years or over	565	644	595

Two nurses are working on attachment schemes with general practitioners, and it is the policy of the Authority to promote further attachments when opportunity occurs.

AUXILIARY NURSING SERVICE

Two persons are employed in this service - they have the use of two mini vans for carrying equipment, such as cleaning materials, bathing necessities and a small quantity of food.

Their duties are, as the term applies, auxiliary to those of the Home (or District) Nurse whereby they undertake work for which a professional nursing qualification is not required but for which other skills in the care of persons are necessary

Mainly they are engaged in the care of the elderly bedridden or housebound person.

IX OCCUPATIONAL THERAPY

The following table shows the age distribution of patients treated and the nature of their various disabilities.

Type of Disability	Age Under 5	Age 5-16	Age 16-40	Age 40-65	Age Over 65	Total
Arthritis	-	-	2	5	22	29
Amputation	-	-	-	2	2	4
Hemiplegia	-	-	-	15	15	30
Multiple Sclerosis	-	-	-	4	1	5
Cerebral Palsy	-	1	-	-	-	1
Organic Nervous Diseases not included above	-	-	-	1	4	5
Spina Bifida	3	1	-	-	-	4
Other Congenital Defects and Deformities	1	1	-	2	-	4
Diseases of the Heart and Circulatory System, Respiratory and Digestive Systems	1	-	-	2	10	13
Injuries of the Head, Trunk and Limbs or of the Spine	-	-	1	1	-	2
Neurosis, Psychoses and other nervous disorders not included above	-	-	2	2	1	5
Total	5	3	5	34	55	102

Of the above patients, 37 attend Occupational Therapy Sessions at Putnoe Clinic. The remaining 65 are seen at home.

The number of training aids supplied to patients was as listed below:

Child's bath seat	1
Rubazote 4" lengths (approx)	25
Long handled shoe horns	2
Stocking pull-ons	5
Wall can-openers	1
Adapted can-openers	1
Tap-turners	3
Latex mesh 8" squares	7
Silicone exercise putty	5
Shoulder exercise pulleys	2
Bread buttering boards	3
Adapted cutlery, sets	1
Adapted kitchen utensils	5
Teapot stands, tilting	1
One hand egg-whisk	1
Vegetable strainer	1
Long handled combs	4
Dressing sticks	6
Undoit jar openers	2
Elastic shoe laces, pairs	6
Switch sticks	4
Writing boards	3
Cycle exercisers	2
Parallel bars, sets	3
Clothing adapted with Velcon and large hook fastenings	7
Rest seat walking aid	1

The above information gives a full indication of the work involved, and as the amount of therapy is increasing each year there is no doubt that an additional Occupational Therapist will be required in order to cope with increasing needs. This is, indeed, a very useful service and one which is very much appreciated by the patients.

X CHIROPODY

Under the Borough Scheme, chiropody treatment is available for persons in the following groups:-

- *Men, 65 years of age and over
- *Women, 60 years of age and over
- Handicapped persons (Irrespective of age)
- Expectant Mothers

*Who are not employed for the greater part of the day.

Treatment by appointment is undertaken at the following centres in the town:-

- Clinic, 29 Barford Avenue
- Health Centre, 23b Carlisle Road, Queen's Park
- Clinic, 85 Queen's Drive, Putnoe, Bedford
- ✓ 15 St. Cuthberts Street (Old People's Welfare Committee)
- Medical Centre, Union Street
- Surgery, 36 Stanley Street (Mrs. F.S. Burrell)
- Surgery, 25 York Street (Mrs. V.L. Newbold)

✓ Not expectant mothers.

In exceptional circumstances, i.e. where a person is completely housebound then treatment at home can be arranged.

The following charges are made:-

- at Clinic - 15p
- at Home - 20p

CHIROPODY

	Local Health Authority	Old People's Welfare Committee	Private Chirop- odist		Total			
				1971	1970	1969	1968	
No. of Patients Treated	350	1,502	262	2,114	1,832	1,616	1,410	
Sessions (excluding Private Surgeries)	143	395		538	537	610	624	
No. of Treatments at Clinics and Surgeries	858	4,242		5,100	4,901	4,754	5,607	
at Private Surgery			1,044	1,044	1,077	1,106	1,119	
No. of Domicilliary Visits	979	2,691	293	3,963	3,506	2,767	2,077	

One can see from these figures that the number of patients treated under the Borough scheme has increased by 50% in four years. There is no doubt but that this service is of vital importance to the maintenance of the general health, comfort and mobility of our senior citizens.

XI CERVICAL CYTOLOGY

	Employees at		Union Street Clinic	Birth Control Clinics	Total		
	Town Hall	Tobler Meltis			1971	1970	1969
No of Tests	15	23	360	334	732	504	363
No of Sessions	1	1	20		22	21	16
No referred for further investigation	-	-	2	5	7	5	3
No referred to own General Practitioner for other reason	3	3	45	134	185	133	55

XII BIRTH CONTROL
FAMILY PLANNING

Guidance on family planning is available to women in Bedford at the centres listed below, but it is necessary to obtain an appointment before attending.

<u>Centre</u>	<u>Times</u>
Clinic, Barford Avenue	Every Wednesday morning
Clinic, Queen's Drive, Putnoe	Every Thursday morning
Medical Centre Union Street (Intra-uterine Contraceptive Device only)	Alternate Wednesday mornings
Bedford General Hospital North Wing, Kimbolton Road	Every Friday morning

There is no fee made for advice or examination at the Borough Clinics but charges are made for contraceptive devices issued or fitted.

CLINIC ATTENDANCES

	Union Street	Barford Ave. Clinic		Putnoe Clinic	Bedford General Hospital		Total		
	I.U.D	I.U.D.	Other	Other	I.U.D.	Other	1971	1970	1969
Number of Women Attending First Time	27	50	91	82	67	166	483	442	312
Total Number Attending	46	103	318	253	99	201	1030	804	614
Number of Attendances - Seen by Doctor Requiring supplies (not seen by Dr.)	70	155	712	578	219	290	2024	1720	1244
	-	-	300	232	-	-	532	445	356
Number of Sessions	6	11	55	52	45		169	126	103

In addition to the above service the Herts. and Beds. Branch of the Family Planning Association also operates clinics in Bedford.

XIII CONVALESCENT HOLIDAYS

Care at Convalescent Homes is arranged for those persons who require a period of convalescence as an aid for recovery from illness, and where such care is unobtainable from any other source (Benefit Society, Trade Union, Hospital etc.).

Patients are asked to contribute towards the cost of the stay at a Home if they are in a position to do so.

During the year arrangements were made for seven persons to have a Convalescent Holiday.

XIV NURSING HOMES

- (a) Under the Conduct of Nursing Homes Regulations 1963 the following nursing homes are registered with this Authority:

Nursing Homes	No of Beds		
	1971	1970	1969
Cheltondale, 84 Castle Road (Mrs D E G Holes, Matron)	17	17	10
Dial House, 38 Park Avenue, (Mrs E G Smith, Matron)	25	25	25

NURSING AGENCIES

- (b) Renewal of a licence to the British Nursing Association, 77A High Street, Bedford, to carry on an agency for the supply of nurses, as required by Section 2 of the Nursing Agencies Act, 1957 was made for a period of twelve months expiring at the end of the year.

XV YOUTH COUNSELLING SERVICE

There is at present a lack of facilities in Bedford to assist the adolescent to bridge the gulf between childhood and maturity, and there is a need to provide adolescents with a counselling service through which their various questions and problems concerning their relationships with others, and their anxieties associated with growing independence can be resolved.

To this end, a Youth Counselling Service which would be staffed by doctors and social workers with a special interest in this field has been set up.

It is proposed to offer the service without a formal referral procedure and to cater for young people between 16 - 22 years.

The service operates from the Medical Centre, Union Street, Bedford, on the first, third and fifth Mondays of each month from 7.30 pm to 9.00 pm and commenced on 6 December 1971.

XV1 PERSONS IN NEED OF CARE AND ATTENTION

1. NATIONAL ASSISTANCE ACT

Under Section 47 of the National Assistance Act 1948, the Medical Officer of Health has powers to cause the removal to hospital of certain persons who are unable to devote to themselves, and are not receiving from other persons, proper care and attention. Although this power is infrequently used, the need for the Medical Officer of Health to be involved in such cases is not infrequent and through the efforts of the Geriatric Health Visitor and the General Practitioners and the support I can give to the General Practitioners it is usual that the patient is admitted to hospital voluntarily, ie. the patient agrees eventually to hospital admission.

Each year a small number of possible cases for action are referred to the Department but legal action is usually not necessary because care for the persons concerned is subsequently obtained.

2. PERSONAL NEEDS

The survey known as "Personal Needs" which began in the latter part of 1967 was completed in the year under review. It created much interest and I thought it would be worthwhile to give the results of the whole survey in summary form.

Firstly, the following table shows the declared needs in the De Parys, Goldington and Kingsbrook Wards, canvassed in the latter part of 1970 and the early part of 1971.

<u>Number of Needs Reported</u>	<u>De Parys Ward</u>		<u>Goldington Ward</u>		<u>Kingsbrook Ward</u>	
	<u>Persons</u>		<u>Persons</u>		<u>Persons</u>	
	<u>Over 60:</u>	<u>Under 60</u>	<u>Over 60:</u>	<u>Under 60</u>	<u>Over 60:</u>	<u>Under 60</u>
Difficulty with Laundry	18	-	11	-	25	-
Difficulties with Meals	17	-	5	-	19	-
Difficulties with Household Chores	28	3	17	4	35	7
Living Alone	71	10	78	5	65	7
Physically Handicapped	50	5	40	10	62	11
Miscellaneous Problems	43	5	55	13	70	12
Difficulty in collecting Library books	10	-	6	-	9	-
Difficulty with Shopping	24	-	7	-	28	-
Not getting out often	27	-	24	-	37	-
Notification of others in need	4	10	2	15	5	10
No problems	34	-	26	-	45	-
	326	33	271	47	400	47

The total declared needs of the whole town, covered by the survey between 1967 and 1971 were as follows:

Difficulties with rent	19
Difficulty in making ends meet	24
Difficulty with meals	67
Difficulty with laundry	54
Difficulty with household chores	150
Difficulty with shopping	59
Difficulty with library books (collection)	31
Living Alone	363
Physically Handicapped, etc	285
Unable to get out often	113
Housing	5
Other Problems	293

In addition we were notified by friends or relations of 71 persons who needed help in some way. In practically all these cases the persons concerned were elderly.

In every case a home visit was made by either a health visitor or social worker and once the problem was assessed, the appropriate supportive service, either statutory or voluntary, was provided.

I am indeed grateful for the ready co-operation given by all those involved in the survey.

A rewarding feature of the survey has been that many of the residents of the Borough have held onto the questionnaire and have submitted it later at a time when they have had a particular problem. With the co-operation of the new Social Services Department of the County Council we can deal with these problems speedily.

XVII MISCELLANEOUS FUNCTIONS

VERMINOUS CONDITIONS, INCLUDING SCABIES
PERSONS TREATED AT CLEANSING STATION

1

	Verminous Heads		Scabies		Total Treatments		
	No	Treatments	No	Treatments	1971	1970	1969
Children	-	-	6	9	9	19	25
Adults	2	2	1	1	3	14	7
Total	2	2	7	10	12	33	32

2. DISPOSAL OF THE DEAD

	1971	1970	1969
No. of bodies received into the mortuary from (a) the Borough (b) other areas	33 52	29 61	64 90
No. of Cremations (a) from the Borough (b) from other areas	429 756	451 731	437 705
No. of Earth Burials (a) from the Borough (b) from other areas	233 67	228 161	231 70

3. MORTUARY

During the year consideration was given to the possibility of linking with the proposed extension of the hospital mortuary.

There is no doubt that a combined mortuary for the use of the hospital and the surrounding district authorities would lead to greater efficiency. Such a link follows naturally from the concept of integration of the health services

XVIII RESEARCH PROJECTS

1. BEDFORD DIABETIC SURVEY

"1972 will be the tenth anniversary of the Bedford Diabetes Survey which brought the town to prominence in the world of diabetes in 1962. Throughout these 10 years, Guy's research team has visited the town once a week to follow up a group of individuals with mild or 'borderline' diabetes, newly discovered in the Survey. They have been the subjects of a controlled trial of treatment, the results of which have contributed greatly to the understanding of diabetes and its treatment. The project, supported for several years by the Department of Health and Social Security, is also unique in the duration and success of its efforts as a long-term prophylactic exercise. This is due in a large part to the spirit of cooperation shown by the Bedford people involved in the trial, the local authority which has facilitated the operation at all stages and to the many doctors, nurses, technicians, employers, health authorities and others who have supported the study at one time or another.

At ten years, the major purposes of the trial will have been achieved. The group of 248 borderline diabetics started on treatment in 1962 had an average age of about 55 years then, 65 years now. Analysis of results suggests that treatment has lowered the frequency of arterial disease among them. About 10% have become clearly diabetic and therefore referred for local specialist care in the ordinary way. In about one third, no further evidence of diabetes has been found and the rest remain very mildly diabetic. An important operation in 1972 will be to sort out, by appropriate testing, those people in whom the diabetic condition merits further medical surveillance and those who can safely be dismissed from the follow-up. Special clinics where comprehensive glucose tolerance testing and appropriate physical examination can be performed are being arranged for mid-1972. We hope to prepare an overall account of the project for publication in monograph form, probably in 1973 and a meeting of interested epidemiologists in Bedford to discuss the outcome of the study is also being considered."

Dr. Harry Keen
Dept. of Medicine
Guy's Hospital
London.

2. GLAUCOMA SURVEY

The following report has been received from Professor Perkins of the Institute of Ophthalmology.

"The aims of this survey were to determine the prevalence of glaucoma in the population examined, to relate ocular tensions to factors such as age, sex, and time of day, to assess the diagnostic methods used and to investigate the early stages of glaucoma.

I am happy to say that these aims were largely achieved. Fifty-five new cases of glaucoma were detected, much information on ocular tension was gained and the diagnostic methods critically reviewed. The long-term follow-up of borderline cases which is still continuing has been most valuable and is still producing new insight into the early stages of the disease.

The rescreening of approximately 10% of the original sample has been of great interest. Two new cases of glaucoma have been detected and a method of visual field screening has been tested and found to give very reliable results.

The long-term follow-up of some borderline cases is continuing at the Institute.

Again, I should like to express our appreciation of the cooperation we have received from the Public Health Department."

Professor E. S. Perkins, M.D.
Institute of Ophthalmology
LONDON

3 INFLUENZA VACCINE TRIALS

Local Authority Staff - Second Year

Pilot Public Health Laboratory Service studies of influenza vaccines were made in several areas during the winter of 1970/71. One of the objects of these studies was to gain experience of the practical difficulties of assessing influenza vaccines in various populations. In Bedford, the Local Authority staff at the Town Hall were invited to participate in the trial and are being asked again this year.

The participants, after a blood sample had been taken, were given influenza vaccine (Admune) and a second blood sample was taken four weeks later. The response of the vaccine was then measured, and throughout the winter a sickness absence of this group of volunteers was compared with non-participants.

Towards the end of the year under review we resumed this study, assessed the level of antibodies remaining in those who were vaccinated and judged the subsequent response to a booster dose of influenza vaccine. We also tried to confirm the diagnosis of influenza should any of those who had influenza vaccine, develop influenzal symptoms.

Bedford Schools - Influenzal Vaccine Trials

Pupils were asked to participate in these trials, and the consent of their parents sought. Those who consented were given influenza vaccine currently available in the United Kingdom. From the beginning of December 1971, the sickness absence in the vaccinated participants was compared with that in the unvaccinated group who did not volunteer.

The object of the investigation is to compare the incidence of sickness absence in vaccinated and unvaccinated pupils, and if possible to confirm the diagnosis of influenza in any pupil who having been given the vaccine, develops influenzal symptoms.

Since 1969, the two Bedford Teacher Training Colleges, together with other Universities in the country have been co-operating with the Public Health Laboratory Service to investigate the origin and development of glandular fever.

Glandular fever (infectious mononucleosis) is a common cause of illness in students. Its most common symptoms are sore throat, enlarged glands and fever. The disease is sometimes mild, but severe attacks also occur with prolonged debility.

Glandular fever has long been known to be infectious but investigation of its course has previously been hampered by the failure to identify the infectious agent responsible. Recently an association has been discovered between a virus (the EB virus) and the development of glandular fever. The significance of this association is being investigated in this large scale survey.

The results of this study leaves no doubt, as would be expected, that many British students already have EB virus antibody by the time they enter university. An even greater rate was observed in students from tropical countries. Probably this antibody usually develops without overt infectious mononucleosis since it is rarely diagnosed in children.

Evidently EB virus antibody is acquired by many students early in college life; indeed the findings during seven months would give an annual incidence of about 20%. If this rate were to continue about three quarters of all students would have antibody to the virus by the time they leave college. These findings, provided they are generally applicable, would explain the low incidence of infectious mononucleosis among older persons in Britain.

This investigation is continuing and subsequent findings will be included in future annual reports.

APPENDIX

Typhoid and Paratyphoid (Enteric) Fevers

Occurrences over the Past 68 Years

(extracted from previous reports)

<u>YEAR</u>	<u>NO. OF CASES</u>		
	<u>TYPHOID</u>	<u>PARATYPHOID</u>	
1970	1	-	The one case which occurred was in a woman who had recently returned from holiday in Pakistan. It was impossible to establish the source of infection. It was thought unlikely that she had contracted the disease whilst on holiday in view of the long incubation period. Investigations followed regarding sweetmeats sent to her from Pakistan. Similar sweetmeats were analysed but no trace of the organism was found. There was no spread of the disease.
1969	3	2	Epidemiological investigations in these cases revealed that the infections were contracted abroad.
1968	-	-	
1967	-	-	
1966	1	2	None of these cases were of a serious nature.
1965	1	1	No comment in the annual report.
1964	-	1	No comment in the annual report.
1963	11	-	The outbreak began on Saturday 19 October. The first patient originated in Bedford General Hospital; during the following week six further cases were notified. Due to the large number of cases both the water and general milk supplies were tested and subsequent researches revealed they were free from infection. At the end of the first week it appeared more likely that a carrier was responsible for the outbreak or a single item of contaminated food. Careful investigations found that the dates of onset were similar in most cases and also their source of food. One shop was singled out as being common to all cases. It was implied that there was either a carrier on the staff or that the food sold was contaminated from an external source. It was further revealed that 80% of the patients consumed corned beef prior to the illness. The corned beef originated from 6 lb. containers opened and sold loose from

<u>NO. OF CASES</u>		
<u>YEAR</u>	<u>TYPHOID</u>	<u>PARATYPHOID</u>

1963 (continued)

the shop. When it became apparent that the corned beef was the likely source of infection the Ministry of Health was pressed to take action to eliminate the source of infection at manufacture. Subsequent cases arising both within and outside the Borough were also found to have a similar date of onset and a strong link with the corned beef was evident. Having established that the corned beef was a probable source of infection it was thought reasonable to suppose that the outbreak was over. This in fact was so, although one secondary case occurred, which was also linked with the corned beef. Four primary and seven secondary cases occurred during this outbreak in surrounding districts but in the secondary cases it was not definitely possible to establish a link with the primary cases. The last case to be notified occurred on 4 November 1963 and at the end of November all cases were pronounced clear. All cases made satisfactory recovery and no deaths occurred. After a period of six months all cases were re-checked and no evidence of infection was found. Evidence suggested the incubation period in this particular outbreak was very short (5-9 days) suggesting a large dose of infected organisms; these were isolated and in all cases the organisms proved to be of Vi phage type E1. This is the same strain as was responsible for the Zermatt outbreak, but as this is a common organism no link could be established.

1962	-	1	No comment made in annual report.
1961	1	-	This case was an Italian woman who contracted the disease abroad as she had gone to Italy on 27 August and returned to Bedford on 23 September. She felt ill on return and was admitted to hospital with a diagnosis of typhoid. Five other persons were excluded from work being contacts and working in the food industry. No further cases occurred.
1960	1	-	The case was an Italian boy of 10 years who had returned from holiday in Italy a week prior to the onset, and it is certain that he contracted the disease abroad.

<u>YEAR</u>	<u>NO. OF CASES</u>		
	<u>TYPHOID</u>	<u>PARATYPHOID</u>	
1959	-	-	
1958	-	-	
1957	-	1	No comment in annual report.
1956	-	1	No comment in annual report.
1955 to 1951	-	No cases	
1950	1	-	This case was a woman of 50 years, it was impossible to trace the source of infection.
1949	-	1	One case of Paratyphoid B was notified in a young woman of 19. The source of infection was not traced.
1948	-	-	
1947	2	1	Only one of these cases was a resident of the Borough, a boy of 17 with Paratyphoid B.
1946	-	-	
1945	1	-	One case was notified, a man of 70 in an institution. Diagnosis was not made until after death.
1944	-	2	Both cases were Paratyphoid B notified from the hospital. Only one of the cases was a resident in the Borough. Not possible to trace source of infection.
1943	-	-	
1942	1	1	"In neither case was the source discovered"
1941	1	3	The paratyphoids were of type B and 2 of the cases appeared to have been infected outside the Borough.
1940	-	2	Both cases were Paratyphoid B and occurred in an institution in the town. They were not Bedford residents and infection took place outside the Borough.
1939	4	-	"Out of the four cases notified it was clear at least three were infected outside the town"
1938	-	1	One case of Paratyphoid B notified from the Public Assistance Institution where he was receiving treatment. It was not possible to discover the source of the disease. The man lived in Bedford but was employed in a large works outside the town.

<u>YEAR</u>	<u>NO. OF CASES</u>		
	<u>TYPHOID</u>	<u>PARATYPHOID</u>	
1937	-	1	Paratyphoid B contracted whilst visiting outside the town.
1936	-	7	The seven cases were notified in May and July. As no common factors were found in food, age, sex or locality it was thought that infection was possibly due to the water supply. The Medical Officer recommended to the Waterworks Committee that the ball hydrants in use be replaced by valves, as it was suspected these were the source of contamination.
1935	1	-	A man of 26 years, with a very mild attack.
1934	-	1	The case was a man of 53 years, who contracted Paratyphoid B and died after the fourth day of admission.
1933	1	1	Both mild attacks of the disease with an average duration of 7-8 days in hospital.
1932	-	1	Paratyphoid B contracted outside the Borough.
1931	-	-	
1930	1	2	The first Paratyphoid B was a girl of 10 years. No trace of source of infection. The second case was also Paratyphoid B in a girl of 19 years, who was removed from an institution in the town to the County Hospital where the disease was diagnosed. The typhoid was a woman of 70 years, who had recently nursed a sister in Devizes, Wiltshire who had died from typhoid; this had originally been diagnosed as influenza.
1929	2	1	The Paratyphoid B was a girl of 20 years, and the source of the disease was not traced. The typhoid cases occurred in a man aged 34 and a woman of 26 who had both been travelling before the onset of the disease. This made it difficult to trace the source of infection.
1928	1	1	The Paratyphoid B was notified in January, the typhoid in August. It was not possible to trace the source of infection.
1927	3	-	No comment in annual report.
1926	-	-	
1925	1	2	All cases were contracted outside the Borough.

<u>YEAR</u>	<u>NO. OF CASES</u>		
	<u>TYPHOID</u>	<u>PARATYPHOID</u>	
1924	-	1	No comment in annual report.
1923	1	-	No comment in annual report.
1922	-	-	
1921	-	-	
1920	3	-	No comment made in annual report.
1919	1	29	The typhoid case was isolated and the source was suspected to be a carrier from Ireland visiting the house. The 29 cases of Paratyphoid B occurred exclusively in the College of Physical Training for Young Ladies. These were mild cases originally diagnosed as influenza. The source was suspected to be a carrier who had been employed as a Kitchenmaid at the College a week before term began.
1918 - 1915			No comments in annual reports.

<u>YEAR</u>	<u>NO. OF CASES OF ENTERIC FEVER</u>		
1914	2		One case was a man of 22 years employed by a travelling theatrical company from a distant town. It was suspected he contracted the disease from eating raw mussels. In the second case no trace of the source was found.
1913	3		No comment in annual report.
1912	-		
1911	2		No comment in annual report.
1910	2		One was caused by eating oysters in a London restaurant. The investigation of the other revealed that it was possibly contracted outside Bedford and was fatal.
1909	2		Both cases were between 25-65 years of age, for the first no definite source was discovered. The second had relations in a neighbouring village in which the disease also occurred, this case was fatal.
1908	2		The first in a woman aged 21 years admitted to the County Hospital where the disease was diagnosed. The second was a woman aged 29. In neither case was the source traced.

<u>YEAR</u>	<u>NO. OF CASES OF ENTERIC FEVER</u>	
1907	4	No comment in annual report.
1906	4	<p>The first was a man aged 34, it is thought that he contracted the disease through eating infected water cress. Subsequent samples were taken and Bacillus coli was found in each.</p> <p>The second case was a nurse aged 25 who contracted the disease while nursing a case in an adjoining County. The third case was a boy of 10 who had eaten some whelks prior to the onset. Specimens of whelks were taken, and the ones without shell were found to contain Bacillus coli. Shortly after removal to hospital the mother contracted the disease.</p>
1905	1	No comment in the annual report.
1904	1	One case was notified and removed to hospital, "that case was of abortive nature".
1903	2	<p>Two cases notified, removed to hospital, none fatal. One case was believed to have been contracted outside the town; the other was of an "obscure" nature.</p> <p>NB At this time low incidence of enteric fever said to give evidence of pure water supply.</p>
1902	1	<p>The case was believed to have been infected by drinking well water.</p> <p>NB It was stated at this time "little known about the disease or its disseminations".</p>

REPORT
OF THE
CHIEF PUBLIC HEALTH INSPECTOR

PUBLIC HEALTH DEPARTMENT
TOWN HALL
BEDFORD

May 1972

To: The Mayor, Aldermen and Councillors
of the Borough of Bedford

Ladies and Gentlemen,

I have the honour to present the Annual Report on the work carried out by the Public Health Inspectors during the year 1971.

It is a matter of regret that the number of routine visits to various premises show a decrease on figures for recent years. This is due in part to a vacancy on the establishment of Public Health Inspectors which existed for the greater part of the year; in part to the increase in the number of complaints investigated, those relating to food and to harassment of tenants being particularly demanding on an Inspector's time; and also to the work which has been undertaken in connection with the Ampthill Road General Improvement Area.

In April the suspension of two smoke control areas came to an end, and later in the year approval was given by the Town Council for the Ampthill Road General Improvement Area to become a smoke controlled area. Confirmation of this order was received from the Department of the Environment in April 1972.

During the year two Inspectors left the employment of this Council, Mr R Finch, who joined the staff of the Chesterton Rural District Council in March, and Mr R Cook, a Senior Inspector who had served this town for eight and a half years, accepted the appointment of Deputy Chief Public Health Inspector at Kings Lynn in August.

I wish to record my appreciation of the service rendered by the late Alderman L H Nicholson MBE as Chairman of the Health Committee for so many years. He was always so understanding and his co-operation in the work undertaken was valued by the Public Health Inspectors.

My thanks are due to the Chairman and members of the Health Committee for their support during the year; to the Medical Officer of Health and other Chief Officers for their help and advice; to Mr Hobday, my Deputy, and to the Inspectors, students, clerical and outdoor staff for their unflinching support throughout the year.

E J CONSTABLE

Chief Public Health Inspector

(a) Unfit Houses

Four houses were demolished. Two of the houses were in private ownership and one of the properties demolished had been previously subject to a Closing Order. Five parts of houses were closed. In four of these instances the second floor rooms were closed because of the lack of adequate means of escape in case of fire.

Since 1955 a total of 1,207 houses have been dealt with, of which 47 are still subject to Closing Orders, the remainder of the properties having been demolished. A total of 47 families consisting of 108 persons were displaced from unfit dwellings. These properties should be demolished during 1972.

(b) Improvement of Dwellings

Applications for Improvement Grants which were approved by the Technical Services Department numbered 160. 127 of these were in respect of discretionary grants, 33 for standard grants.

A tenant may make application to the Local Authority with a view to the landlord of the property being required to carry out improvements. During 1971 one application was received. The owner of the house was notified and given a copy of the representation made by the tenant. Discussions have taken place with the owners and they have agreed in principle to the installation of the standard amenities.

As a result of applications made during previous years three houses were provided with improved facilities and at four houses work was in progress at the end of the year.

Six applications for Qualification Certificates were received from owners who proposed to carry out improvement to the properties and three applications were outstanding from 1970. Six applications were approved and a provisional qualification certificate issued; one was withdrawn and the remaining two were outstanding at the end of 1971. After a provisional qualification certificate has been issued the owner contacts the Rent Officer in order to agree a fair rent. When the repairs and improvements have been completed the Landlord produces a certificate of fair rent to the Local Authority who, if satisfied that the qualifying conditions have been met then issue a qualification certificate sending a copy to the tenant.

36 applications for a qualification certificate were received from owners of properties who stated that the standard amenities were already provided and there were two applications still outstanding from 1970. 17 of these applications were approved and 14 were refused on the grounds either that all standard amenities were not available or that the house was in need of repair. Seven applications were outstanding at the end of the year.

(c) General Improvement Area

Some progress was achieved in connection with the Ampthill Road General Improvement Area but the number of applications for improvement received

from private individuals was disappointing, only nine being approved of which four were in respect of Council properties. Plans are being prepared for the improvement of the Council owned houses and such applications have been approved during the early part of 1972. It is anticipated that schemes will have been prepared for all Council properties in this area during this year.

Mr M A Thrower was appointed as Improvement Area Liaison Officer following Mr Cook's resignation and he continued with the detailed inspection of all properties in the area. During the year the Council approved making the Improvement Area into a Smoke Control Area and final approval from the Department of the Environment is now awaited. Two meetings were held with representatives of the Department of the Environment to discuss details of the General Improvement Area and two houses were improved and opened to the public for viewing. An exhibition was also arranged together with a public meeting at which over 200 people were present. By the end of the year the pedestrian crossing for Amphill Road had been provided, work on improving the playground was in progress and the re-paving of Houghton Road and Millbrook Road had commenced.

Mr Thrower has maintained contact with the Residents' Association which was formed following the public meeting and has attended several of the meetings of the Association.

Detailed inspection of properties has continued and owners have been notified of works which are considered to be necessary.

(d) Houses in Multiple Occupation

782 houses are known to be in multiple occupation and it is estimated that these premises are occupied by 4,091 adults and 2,098 children.

A total of 651 inspections were made of houses in multiple occupation. Most problems tend to arise in houses where there is a frequent change of tenants.

Valuable assistance has been received from the Chief Fire Officer and his staff in advising on the provision of fire escapes. These recommendations are incorporated in a notice requiring the owner to provide a fire escape.

Two Management Orders previously served under Section 12 of the Housing Act 1961 were revoked on application by the owners. The two houses in question had reverted to single occupancy.

2 RENT ACTS

No applications for certificates of disrepair were received.

37 reports were received regarding harassment by Landlords in an endeavour to evict tenants. These were investigated and in all but one of the cases the difficulties were resolved or it was decided that there was insufficient evidence to prove that harassment had occurred.

In one case legal proceedings were instigated for unlawful eviction and the landlord was fined £5. Legal proceedings were also instituted for rent charged in excess of that fixed by the Rent Tribunal. The landlord was fined £40 and ordered to pay back the excess rent charged.

3 PUBLIC HEALTH ACTS

(a) Drainage and Sewerage

295 drains were tested or inspected on complaint and where necessary works of repair or reconstruction were carried out. It was necessary to clear blockages in the drains at 489 premises.

Repairs or reconstruction of sewers were carried out at 48 premises of which eight were emergency works when immediate action was necessary. In some cases the works were carried out by the owners of the properties and in others the repairs were undertaken by the Local Authority and the cost recovered from the owners.

Three notices were served under Section 17 of the Public Health Act 1961 which requires an owner to clear a stopped up drain within 48 hours. In one case the work was carried out by the Local Authority in default and the cost charged to the owner and in the other instances the work was carried out by the owners. One notice was served under Section 18 of the Public Health Act 1961 which is a notice of the Local Authority's intention to repair a drain or private sewer within seven days. In this case the work was carried out by the owner of the property within the seven days obviating further action by the Local Authority.

(b) Water Supply

All house properties have an internal water supply from the public mains with the exception of two houses in Cardington Road.

(c) Other Amenities

It is estimated that some 1650 houses in the Borough are without fixed baths.

(d) Moveable Dwellings

There are no licensed caravan sites within the Borough.

Visits are made to the fairs and circuses held in Bedford. Those visited were satisfactory.

On two occasions during the year a number of gypsy caravans pulled in on the lay-by near Cardington Cross and on the nearby grass verge. Complaints were received of rubbish and excreta in the roadside ditch and in the riverside copse. The gypsies left in early February and the lay-by site was fenced and ditched. Unfortunately this precaution proved ineffective and a further 10 vans appeared on the site later in the year. It is difficult to see an improvement in the position until a suitable site is provided.

A number of caravans occupied by persons employed in building operations continue to be stationed in the District. Most of the caravans have a piped supply of water and a chemical closet. There are also two WCs on the site and refuse collection has also been organised. A site licence for vans is not required on land on which building or engineering operations are being carried out.

(e) Disinfection

A cleansing station is maintained in Barker's Lane where there is a steam disinfecter.

(f) Disinfestation

Treatment was given at 245 premises for the eradication of various insect pests, 199 of which were in respect of wasps nests. A charge of £1.25 is made for the treatment and destruction of wasps nests, but discretion is exercised in cases of hardship.

(g) Public Health (Recurring Nuisances) Act 1969

This Act enables a local authority to serve a notice prohibiting a recurrence of a nuisance and requiring the person causing the nuisance to take such steps as may be necessary to prevent a recurrence.

11 complaints were received concerning noise from late night parties. Five statutory notices were served where music was being amplified to an unreasonable level and disturbing other inhabitants in the neighbourhood. The police receive the majority of the complaints about noise from late night parties and they forward statements from complainants and from the duty Constable through to the Health Department. If necessary further investigations are made and additional statements taken before notices are served.

In two instances the service of prohibition notices did not prevent the continuance of noisy late parties, the local authority caused complaints to be made to a Justice of the Peace, and summonses were served upon the persons responsible for holding the parties. When the complaints were heard the Magistrates were satisfied that a nuisance had recurred and made Nuisance Orders prohibiting a further recurrence.

4 FOOD AND DRUGS

(a) Food Hygiene

Regular inspections have been made of all food premises in the town. Within the last year 11 new catering establishments have been opened and one closed. It is not always necessary for planning permission to be obtained before food premises are opened and there is no obligation on the new occupier to notify the local authority of his intentions. Fortunately in the majority of instances occupiers have the good sense to approach the department for advice but in some cases much depends on the vigilance of the District Public Health Inspector.

Two market stall holders were discovered smoking whilst handling open food and were reminded of the requirements of the Food Hygiene Regulations.

It was not considered necessary to institute legal proceedings for this offence during the year.

(b) Food Control

(i) Food Sampling and Complaints

171 samples were purchased and submitted to the Public Analyst for examination. 81 were milk samples and 90 samples of other food. Of the 76 complaints received regarding food twenty were submitted to the Public Analyst for his observations. It is interesting to note that the number of food complaints made by members of the public to the Department have increased two and a half times since 1969 when 29 complaints were received. The majority of the complaints referred to meat and meat products, milk and milk products and bread. Each complaint is fully investigated and entails inspectors in a considerable amount of investigations. Complainants, retailers or wholesalers or manufacturers have to be contacted and interviewed. The Public Analyst is also involved and liaison is maintained with the Town Clerk's Department where legal proceedings are contemplated.

The following table lists the instances where legal proceedings were instituted:

<u>Article</u>	<u>Nature of Complaint or Adulteration</u>	<u>Result of Legal Proceedings</u>
Orange Crush Bottle	Foreign matter approx 2 grams lime and sand mixed with iron oxide resembling concrete matter	Legal proceedings instituted. Fined £10
Park Baked Bread	Contaminated on the exterior with iron oxide and oily matter	Legal proceedings instituted. Fined £25
Bread, white (8 slices)	Two of the slices contaminated with iron rust and grease	Legal proceedings instituted. Fined £5
Lemonade	Contained foreign matter	Legal proceedings instituted. Fined £20
Bottle of Milk	Contained stale milk residue with non-viable fungus some of which adhered firmly to the interior of the bottle and some found to be in suspension in the milk	Legal proceedings instituted. Fined £10
Mince Pie	Contained a small amount of foreign substance resembling white paint composed of acid-insoluble in organic matter and organic matters	Legal proceedings instituted. Fined £10
Bacon	Unsound	Legal proceedings instituted. Fined £20

<u>Article</u>	<u>Nature of Complaint or Adulteration</u>	<u>Result of Legal Proceedings</u>
Yogurt	Contaminated with mould	Legal proceedings instituted. Fined £30
Sausage Roll	Contaminated with mould	Legal proceedings instituted. Fined £10
Pork Pie	Containing an insect	Legal proceedings instituted. Fined £20
Bacon Pieces	Contained mouse droppings	Legal proceedings instituted. Fined £25
Orange Drink	Mouldy	Legal proceedings instituted. Case dismissed.
Cambridge Formula Loaf	Mouldy	Legal proceedings instituted. Defendants pleaded warranty. Case dismissed.
Cheese Spread	Mouldy	Legal proceedings instituted. Fined £15
Bottle of Milk	Containing Glass	Legal proceedings instituted. Fined £10

Three other food complaints were of particular interest and are worth comment. In one instance a complaint was received of sausage rolls tasting of petrol. The resultant investigation revealed that the delivery vehicle had a hairline fracture of the fuel pipe and the consequent increase in fumes had caused the contamination. The necessary repairs to the vehicle were carried out and the interior steam cleaned to remove all lingering traces of fumes.

The other complaints referred to involved two tins of a malted milk drink containing iron filings. An enquiry revealed that the manufacturers had recently renewed conveyor guides on a belt carrying the malted milk drink to the final granulating and packing process. The metal swarf resulting from the renewal of the conveyor guides caused overloading of the permanent magnets which remove the minute traces of metal occurring during normal working and the subsequent contamination of the malted milk drink. After discovering the fault the manufacturers attempted to withdraw all affected tins from sale but unfortunately a number were sold to the public. Three other local authorities also received complaints, and legal proceedings were instituted by the authority in whose area the manufacturing plant is situated.

(ii) Date Stamping

Date stamping of perishable food continues to be a subject of considerable public interest. Most of the manufacturers stamp their products with a code which is indecipherable to the general public and in some cases is not even known by the retailer. Some of the larger food stores, however, take precautions and stamp food with their own code. It is surprising that a number of supermarket managers continue to allow delivery vehicle drivers to check displays of yogurt, cakes etc without carrying out any comprehensive check themselves. At the time of the public health inspector's visit the ultimate responsibility of the store manager is always emphasised.

Date stamping of food is still being considered at national level but an obvious step forward would be the stamping of perishable foods with the last date by which the food should be sold.

At the end of this report is a table which is required by the Department of Health and Social Security and gives the categories of food trades operating in the District.

(c) Poultry Processing Plants

There are no poultry processing plants in the district.

(d) Ice-Cream

The number of registered ice-cream premises is 281. This is an increase of 9 on the previous year. 77 samples of ice-cream were submitted for examination to the Public Health Laboratory. The results were as follows:

<u>Grade</u>	<u>Number of Samples</u>	<u>Percentage</u>
1 Satisfactory	36	46.7
2 Fairly Satisfactory	22	28.6
3 Unsatisfactory	12	15.6
4 Very Unsatisfactory	7	9.1

There is not a legal standard for ice-cream but the Public Health Laboratory Service recommend that over a six month period not more than 20 per cent of a vendors samples should fall into grade 3 and none into grade 4. These results are an improvement on the results for 1970 when almost 35 per cent of the samples taken fell into grades 3 or 4, but continue to cause concern.

(e) Imported Food

With the introduction of containerisation the Imported Food Regulations 1968 allowed for containers to pass through the port of entry without examination. It was made the responsibility of the port of entry to notify the local authority for whose area the container was destined in order to allow an inspection at the receiving premises. The following notifications were received and examinations carried out where necessary:

Newport

- (i) 35 notifications involving 99 containers of chocolate crumb
- (ii) 2 notifications involving 2 containers of biscuits

Liverpool

- (i) 1 notification involving 2 containers of chocolate crumb
- (ii) 1 notification involving 2 containers of biscuits

Harwich

1 notification involving 900 cartons of tinned tomatoes

Manchester

2 notifications involving 2 containers of chocolate crumb

(f) Milk and Dairies (General) Regulations 1959

Milk (Special Designations) Regulations 1963 to 1965

All milk sold in this area is now processed outside the district.

The decrease in the number of milk licences issued is attributable to the fact that some of the smaller shops had either closed or decided not to sell milk since the licences were last renewed five years ago.

327 samples of milk were submitted to the Public Health Laboratory for examination. 235 of the samples were of pasteurised milk. The samples are taken weekly from delivery vehicles, shops, supermarkets and schools and delivered in an insulated container to the Public Health Laboratory. There they undergo the statutory tests. The methylene blue test is an indication of the keeping quality of the milk and 21 of the samples submitted failed this test. In the event of a failure repeat samples are taken and checks on storage and delivery times made. None of the samples submitted failed the Phosphatase Test. This is a test which indicates the efficiency of pasteurisation.

48 of the 50 samples of sterilised milk were satisfactory and of the 42 ultra heat treated milk samples three failed the colony count test which also indicates whether the treatment has been satisfactorily carried out.

5 SLAUGHTERHOUSES ACT 1958 SLAUGHTER OF ANIMALS ACT 1958

There is one private slaughterhouse in the Borough and during the hours of slaughter a public health inspector is always present. A charge under the Meat Inspection Regulations is made for the meat inspection service and during the year £1172.46 was received. This is an increase of £320.49 on the previous year, and can be accounted for by an increase

in the number of animals slaughtered and an increase in the Authority's inspection charges.

9 licences were issued to slaughtermen.

6 ATMOSPHERIC POLLUTION

(a) Smoke Control Areas

A number of applications for the payment of grant were received on the Number 4 Smoke Control Area and grants totalling £1,053 were paid for conversions. Four sevenths of this amount is recoverable from the Government.

During the year the Council approved the making of the Amptill Road General Improvement Area a Smoke Control Area and this was submitted to the Department of the Environment for confirmation.

The serious shortage of solid smokeless fuel during the 1970/71 winter resulted in the suspension of the Borough's Numbers 1 and 2 Smoke Control Orders. The suspensions terminated on 30 April 1971 and the areas again became subject to smoke control orders.

(b) Installation of New Furnaces

It is a requirement of the Clean Air Act 1956 that the proposed installation of all new furnaces (except those rated at less than 55,000 BTU per hour) must be notified to the local authority. An occupier may also apply for local authority approval that the proposed unit is capable of substantially smokeless operation. Three such applications for prior approval were received and approved.

(c) National Survey of Atmospheric Pollution

Four recording stations are operated by the Council in co-operation with the Warren Spring Laboratory as part of the National Survey.

Suspended Matter Expressed as Microgrammes per Cubic Metre

Month	Putnoe Clinic	Allens Works	Civil Defence Centre Albert Street	Barford Avenue Clinic
January	N	98	110	129
February	30	102	107	90
March	40	65	92	76
April	N	N	76	81
May	12	19	15	18
June	7	9	9	13
July	11	13	13	N
August	16	19	24	20
September	18	25	28	37
October	61	74	107	93
November	72	61	79	105
December	52	75	77	79

Sulphur Dioxide by the Volumetric Method
expressed as Microgrammes per Cubic Metre

Month	Putnoe Clinic	Allens Works	Civil Defence Centre Albert Street	Barford Avenue Clinic
January	N	103	101	117
February	101	116	134	141
March	75	112	128	141
April	N	N	83	111
May	30	45	45	42
June	22	33	30	40
July	20	26	28	N
August	26	24	36	47
September	45	32	39	53
October	67	60	85	111
November	57	70	77	154
December	60	88	89	90

N = NO RESULT

7 OFFICES, SHOPS AND
RAILWAY PREMISES ACT 1963

1,028 premises are registered with the Borough Council in accordance with the provisions of the Offices, Shops and Railway Premises Act 1963.

This is an increase of 14 premises compared with 1970, 13 registrations having been cancelled for various reasons. 33¹/₄ visits were made to premises at which 179 were full inspections. No exemptions from the provisions of the Act were granted.

19 accidents which occurred at registered premises were notified to the authority. Investigations into the causes of these accidents are made where necessary.

Details of registration at premises, the number of persons employed and the number of accidents which have been notified are given at the end of this report.

Most of the premises satisfy the requirements of the Act and in general only minor contraventions are discovered. In the case of new buildings many difficulties are overcome at the planning stage. The greatest difficulty arises however in the case of large office buildings which are constructed by developers and later let to a number of occupiers. Sanitary accommodation and washing facilities are generally provided at each floor but no details are available regarding staff welfare facilities and office arrangement and size. These are not known until each individual occupier moves into the building and problems can arise where additional plumbing or ventilation etc is required.

8 FACTORIES ACT 1961

Forty inspections of factories in connection with the above Act were made. In only two instances was it necessary to serve informal notices to remedy defects.

9 PREVENTION OF DAMAGE BY PESTS ACT 1949

336 premises were surveyed and inspected following complaints of rats or mice. 268 were found to be infested and treatment was carried out by the local authority's rodent control staff. At private houses treatment is carried out free of charge but at business premises a charge of £1.10 per man hour is made for treatment. 52 contracts were entered into and the sum of £138.60 received.

Treatment of 500 sewer manholes was undertaken by a private firm under contract to the Corporation.

10 OTHER ACTS

(a) Noise Abatement Act 1960

17 complaints regarding noise nuisance were reported, a majority of these referring to noise from machinery and factories. Noise from late night parties is not included, this being dealt with under the Public Health (Recurring Nuisances) Act 1969 referred to previously. All complaints were investigated and action taken where necessary.

Following complaints of noise from wind tunnels operating in the district a noise survey was carried out. As a result of this survey, the Health Committee decided that consultants be instructed to make an investigation and advise the Council with regard to control measures which might be appropriate.

(b) Rag, Flock and Other Filling Materials Act 1951

Three premises are registered.

(c) Pet Animals Act 1951

Six premises are registered and all have been inspected and found to be satisfactory.

(d) National Assistance Act 1948 -

Section 50 Burial or Cremation of the Dead

Funerals of four persons were undertaken as no other arrangements had been made. The following table gives details showing the cost of burial or cremation and recovery of expenses:

No	Age (Years)	Sex	Cost of Burial or Cremation	Recovery of Expenses
1	85	Female	£34.35	Nil - Death Grant not payable
2	50	Male	£28.05	Full cost recovered
3	Stillborn		£ 4.60	Nil - Death Grant not payable
4	21	Male	£30.50	Part Cost recovered

(e) Scrap Metal Dealers Act 1964

13 premises are registered.

(f) Diseases of Animals Act 1951

Staff were on duty at the Poultry Market in Horne Lane and the Cattle Market in Commercial Road whenever a sale was held.

The Fowl Pest (Infected Areas) Special Order Number 3 1970 which involved Bedford was lifted on 8 March 1971. The Market is licensed for the sale of poultry for immediate slaughter. A slaughter room is provided at the sale yard and this is used almost solely by Pakistani immigrants for the ritual slaughter of live poultry bought at the auction.

Licences for the removal of swine are required and 1,483 such licences involving 36,749 animals were issued. Facilities for the cleansing and disinfecting of cattle lorries are provided at the market and a small fee is charged for the use of these facilities.

As in previous years in conjunction with Mander College a course in Food Hygiene was organised. Nine of the students attending obtained the Elementary Food Hygiene Certificate issued by the Department and a further six were successful in gaining the Certificate in the Hygiene of Food Retailing and Catering of the Royal Society for the promotion of Health.

12 MISCELLANEOUS(a) Medical Arrangements for
Long Stay Immigrants

Details of arrivals of long stay immigrants who state their intention to reside in Bedford are received from the place of disembarkation and each immigrant is visited and invited to report to the Medical Officer of Health and to complete a short questionnaire of their medical history mainly with a view of excluding the possibility of active Tuberculosis.

142 notifications were received throughout the year and of these it was discovered that on visiting seven had already moved to the area of another authority and that authority advised and ten could not be traced.

(b) Water Sampling

Water samples are taken from household taps, Robinson and Newnham Swimming Pools and Schools' Swimming Pools, and from the river at Clapham Pumping Station and submitted to the Public Health Laboratory for bacteriological examination.

377 samples were submitted and a breakdown of the samples and the results are given in the tables in the Medical Officer of Health's Report on page 14

13. STATISTICAL TABLES

1. Housing

No. of Houses demolished:-

Private Ownership	2
Owned by Local Authority	2

No. of dwellings closed:-

Houses	-
Part of buildings	5

No. of families displaced 47

No. of persons displaced 108

* No. of dwelling houses found not to be reasonably fit for habitation 335

No. of dwelling houses rendered fit 86

2. Houses in Multiple Occupation

Number of premises occupied as Houses in Multiple Occupation at 31 December 1971 782

Number of persons occupying these premises

Adults	4091
Children	2098

Total Persons 6189

* The majority were informal advisory notices served during the latter part of the year after house to house inspections in the General Improvement Area.

3 Housing Act 1969

Number of applications for Qualification Certificates where improvements are proposed	6
Number of Provisional Qualification Certificates issued	6
Number of Qualification Certificates issued	5
Number of applications for Qualification Certificates where standard amenities are already provided	36
Number of applications approved	17

4 Food Inspection

(A) Number of Premises

	No.
Bakehouses	14
Brewery and Soft Drink Manufacturers	1
Butchers	39
Cafes and Restaurants	65
Canteens (Works and Schools)	84
Confectioners	68
Fishmongers (including Fish Fryers)	17
Food Storage Depots	21
Fruiterers and Greengrocers	33
Grocery and Provisions	88
Licensed Premises	115
Sweet and Chocolate Manufacturers	2
Ice Cream Manufacturers	1
Supermarkets	17
Cheese Manufacturer	1
Meat Packing Plant	2

In addition there are 42 food stalls on the market square, as follows:

Confectionery	3
Fish	3
Snack Bars	2
Fruit and Vegetables	32
Poultry	2

(B) Samples sent to Public Analyst

(i) Purchases

Nature of Sample	Informal	Formal
Butter, Margarine and Lard	1	-
Confectionery - Sugar	1	-
Cream	2	-
Fish, Tinned and Fish Pastes	3	-
Groceries, Miscellaneous	46	-
Ice Cream	9	-
Meat and Meat Products	12	-
Medicines	2	-
Milk	81	-
Preserves	5	-
Sausages and Sausage Meat	9	-
Spirits	-	4
	171	4

(ii) Complaints

Nature of Sample	Number
Beer (Canned)	1
Bread	17
Cake and Pastry	2
Cheese	2
Chocolate and Sweets	2
Crisps	1
Eggs	1
Fruit Drinks, Squashes etc.	6
Meat and Meat Products	18
Preserves	1
Tinned Goods	6
Tomatoes	1
Milk	10
Milk Products	8
	76

(C) Dairies and Milk Distribution

Milk Distributors	75
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(D) Milk (Special Designations) Licences

						<u>No. of Licences</u>
Ultra-heat treated	36
Pasteurised Milk	...	...	...	...	...	7 ⁴
Sterilised Milk	...	...	...	...	...	43
						<hr/> 153 <hr/>

(E) Examination of Specially Designated Milk

Designation of Milk	Samples Submitted	Methylene Blue Test*		Phosphatase Test		Turbidity Test		Colony Count Test	
		Passed	Failed	Passed	Failed	Passed	Failed	Passed	Failed
Pasteurised	235	208	21	235	-	-	-	-	-
Sterilised	50	-	-	-	-	48	2	-	-
U.H.T.	42	-	-	-	-	-	-	30	3

* The Methylene Blue Test in respect of 6 pasteurised samples was invalid as the atmospheric shade temperature exceeded 65°f

(F) Slaughterhouse

(1) Carcasses Inspected and Condemned

	Cattle (ex- cluding cows)	Cows	Calves	Sheep & Lambs	Goats	Pigs	Total
Number Killed and inspected	4,084	149	130	6,269	54	9,042	19,728
<u>All diseases except tuberculosis and cysticercosis</u>							
Whole carcasses condemned	-	1	-	16	-	12	29
Carcasses of which some part or organ was condemned	1,135	23	3	438	-	848	2,447
Percentage of number inspected affected with disease other than tuberculosis & cysticercosis	27.8	16.1	2.3	7.2	-	9.5	12.5
<u>Tuberculosis only</u>							
Whole carcasses condemned	-	-	-	-	-	-	-
Carcasses of which some part or organ was condemned	-	-	-	-	-	37	37
Percentage of number inspected affected with tuberculosis	-	-	-	-	-	0.4	0.2
<u>Cysticercus Bovis</u>							
Carcasses with some part or organ condemned	8	-	-	-	-	-	8
Carcasses submitted to treatment by refrigeration	8	-	-	-	-	-	8
Generalized and totally condemned	-	-	-	-	-	-	-

(2) Meat Weight Condemned

Class of Animal	Tuberculosis			Other Diseases			Total Lbs
	Whole Carcase	Part Carcase & Offal	Lbs.	Whole Carcase	Part Carcase & Offal	Lbs.	
Cattle (excluding cows)	-	-	-	2	1,135	14,683	14,683
Cows	-	-	-	1	23	894	894
Calves	-	-	-	-	3	26	26
Sheep & Lambs	-	-	-	16	438	2,061	2,061
Pigs	-	37	451	12	848	5,683	6,314
Total	-	37	451	31	2,447	23,347	23,978

(G) Other Foods Condemned

<u>Class of Food</u>	<u>lbs.</u>
Meat and meat products	1,115
Other tinned goods	4,507
Meat, English, retail shops	815
" " wholesale	2,821
Meat Imported, retail shops	415
" " wholesale	130
Cooked Meat and Meat Products	232
Fish	111
Fruit and vegetables	888
Frozen Foods	1,301
Ice Cream	153
Chocolate	129
Miscellaneous Drugs	16
Flour and Cereals	437
Drinks	6
TOTAL	<u>13,076</u>

TABLE A - REGISTRATIONS AND GENERAL INSPECTIONS

Class of Premises	No. of Premises Registered during the year	Total No. of Premises Registered at end of the year	No. of Premises receiving a general inspection during the year
Offices	15	350	40
Retail Shops	9	527	97
Wholesale Shops and Warehouses	1	69	4
Catering Establishments open to the public and canteens	2	75	38
Fuel Storage Depots	-	7	-
Totals	27	1028	179

TABLE B - NUMBER OF VISITS OF ALL KINDS BY INSPECTORS TO REGISTERED PREMISES

334

TABLE C - EMPLOYED IN REGISTERED PREMISES OR WORKPLACE

<u>Class of Workplace</u>	<u>No. of Persons Employed</u>
Offices	5862
Shops	4165
Wholesale Departments and Warehouses	598
Catering Establishments open to the public	680
Canteens	86
Fuel Storage Depots	11
Total	11402
Total - Males 5179	Total - Females 6223

TABLE D - EXEMPTIONS

There were no exemptions granted during 1971.

TABLE E - PROSECUTIONS

Prosecutions instituted of which the hearing was completed in 1971 - NIL
 No. of Complaints (or summary applications) made under Section 22 - NIL
 No. of Interim Orders granted - NIL

TABLE F - INSPECTORS

No. of Inspectors appointed under Section 52(1) or (5) of the Act - 7
 No. of other staff employed for most of their time on work in connection with the Act - Nil

ACCIDENTS
 Workplace and Sex

Class of Workplace	Adults over 18 years		Young Persons under 18 yrs	
	Males	Females	Males	Females
Offices	-	3	-	-
Retail Shops	5	4	1	1
Wholesale Shops and Warehouses	3	-	-	-
Catering Establishments	2	-	-	-
Canteens	-	-	-	-
Fuel Storage Depots	-	-	-	-

ACCIDENTS

Primary Cause	Type of Injury						Total
	Fractures & Dislocations	Sprains and Strains	Open Wounds & Surface Injury	Amputation	Bruising Crushing Con - Cussion	Foreign Body in Eye	
Handling Goods	3	2	-	-	2	-	7
Use of Hand Tools	-	-	1	-	-	-	1
Falls on the same level	1	-	-	1	-	-	2
Falls from one level to another	1	1	-	-	1	-	3
Falls on or from ladders or step-ladders	-	1	-	-	-	-	1
Machinery (Power & Non Power)	-	-	1	1	-	-	2
Fire & Explosion	-	-	-	-	-	1	1
Vehicle in Motion not moved by Power	-	-	1	-	-	-	1
Stepping on or Striking against object or person	-	-	-	-	1	-	1
Total	5	4	3	2	4	1	19

6. Factories Act 1961

(A) Inspections for Purposes of Provisions as to Health

Premises	No. on Register	No. of Inspections	No. of Written Notices	No. of Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	16	3	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	270	37	2	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises)	34	1	-	-
TOTAL	320	41	2	-

(B) Cases in which defects were found

PARTICULARS	No. of cases in which defects were found			No. of cases in which proceedings were instituted
	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector
Want of Cleanliness	-	-	-	-
Overcrowding	-	-	-	-
Unreasonable temperature	-	-	-	-
Inadequate ventilation	-	-	-	-
Ineffective drainage of floors	-	-	-	-
Sanitary Conveniences	-	-	-	-
(a) Insufficient	-	-	-	-
(b) Unsuitable or defective	2	2	-	-
(c) Not separate for sexes	-	-	-	-
Other offences against the Act - (not including offences relating to outwork)	-	*	-	-
TOTAL	2	*	-	-

*Includes outstanding notice from previous year

(c) Outwork

	Section 133			Section 134		
	No. of outworkers in August list required by Section 113 (1) (c)	No. of cases in default of sending lists to the Council	No. of Prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing Apparel (Making, Cleaning & Washing)	57	-	-	-	-	-
Curtains and furniture hangings	1	-	-	-	-	-

There is a Nil return for all other types of outwork

7 Prevention of **Damage** by Pests Act 1949

Premises Inspected and Treated

Properties Other Than Sewers	Type of Property	
	Non-Agricultural	Agricultural
1(a) Total number of properties (including nearby premises) inspected following notification	299	1
(b) Number infested by :-		
(i) Rats	178	1
(ii) Mice	79	-
2(a) Total number of properties inspected for rats and/or mice for reasons other than notification	36	-
(b) Number infested by :-		
(i) Rats	8	-
(ii) Mice	2	-

8. Premises Disinfested

Premises	Nature of Vermin	Number of Premises
Houses - Council	Bugs	2
	Ants	2
	Wasps	17
	Beetles, etc	2
Houses - Privately Owned	Bugs	3
	Ants	7
	Wasps	160
	Beetles, etc	27
Business Premises	Bugs	-
	Ants	2
	Wasps	22
	Beetles, etc	1
Total		245

10 Summary of General Inspections and Administrative Duties

Housing

Visits to houses, Housing Act, 1957	549
Visits to Premises, Public Health Act, 1936	500

Overcrowding (not including houses in Multiple Occupation)

Visits	23
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Infectious Diseases

Investigations undertaken	636
Specimens submitted to Public Health Laboratory	402

Verminous and other Conditions

Visits to verminous premises	145
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Drainage

Drains tested or inspected	295
Revisits during repairs or reconstruction	104
Block drains cleared	489

Visits to

Houses in Multiple Occupation	651
Moveable Dwellings, Caravans, etc.	55
Public Houses	38
Clubs	19
Restaurants	418
Fish Frying Premises	24
Slaughterhouses	584
Works Canteens	54
Dairies	3
School Canteens	26
Other Shops and Premises where Food is Prepared, stored or exposed for sale	1,467
Bakehouses	38
Places of Entertainment	13
Factories with mechanical power	37
Factories without mechanical power	3
Work Places	1
Visits reference complaint or nuisances discovered	564
Miscellaneous visits	857
Unsuccessful visits	1,456

Food and Drugs

Samples submitted to Public Analyst	
Milk	81
Ice Cream	9
Other Food and Drugs	98

Food Complaints

No of Complaints	76
No of Interviews	288

Samples examined by the Public Health Laboratory Service	
Milk	327
Ice Cream	77
Rats and Mice Destruction	
Inspection of Premises, etc. by Public Health Inspectors	149
Inspection of Premises, etc. by Rodent Operators	336
Visits for treatment, including revisits	907
Rent Act	
Interviews	52
Investigations	37
Smoke Abatement	
Observations	39
Interviews with managers, stokers, etc.	32
Inspection of boiler plants	19
Smoke Control - visits	57
Atmospheric pollution apparatus - Recordings	1189
Offices, Shops and Railway Premises Act	
Visits to Offices	79
Visits to Retail Shops	206
Visits to Wholesale Depots & Warehouses	12
Visits to Catering Establishments & Canteens	37
General and Office Routine	
Visits for interviews	926
Interviews at office	1052
Attendances at magistrates' courts	15
Noise	
Visits	145
Diseases of Animals	
Visits to (a) Cattle Market	51
(b) Poultry Market	39

General Administration

Notices served:

	<u>Informal</u>	<u>Formal</u>
Housing Acts	304	36
Landlord and Tenant Act	7	-
Public Health Acts	31	86
Factories Act	2	-
Food Hygiene Regulations	31	-
Offices, Shops and Railway Premises Act	17	-
Food Hygiene (Market, Stalls and Delivery Vehicles) Regulations	1	-
Clean Air Act 1956	-	4
	<u>393</u>	<u>126</u>

